



remuneration paid by SIU while an SIU employee; income from mutual funds not managed by the investigator, and income from lectures, workshops, panels, etc., for universities and state, local, or federal agencies.

2. Financial Income from Non-publically Traded Companies                      YES        NO

Over the past 12 months, have you receiving income in excess of \$5000 from a non-publically traded company that is in any way related to or that might be affected by your proposed research activities? Examples of income include salary, consulting fees, honoraria, paid authorship.

3. Equity Interests in Non-publically Traded Companies                      YES        NO

Over the past 12 months, have you held any equity interest in a non-publically traded company that is in any way related to or that might be affected by your proposed research activities?

4. Intellectual Property    YES        NO

Have you received any income from intellectual property rights and interests (e.g. from patents, copyrights, or royalty agreements) from any companies in any way related to or that might be affected by your proposed research?

5. SBIR/STTR Phase II    YES        NO

Have you held any equity interest in a SBIR/STTR phase II funded company that is in any way related to or that might be affected by your proposed research activities?

6. Paid Travel by Companies    YES        NO

Have you received any travel that has been paid for or reimbursed by any entity other than a Federal, state or local government, an institution of higher education, an academic teaching hospital, a medical center or a research institute associated with an institution of higher education?

If you have answered “yes” to Question #6, please provide the following information before forwarding to OSPA. Please note that you may be asked for more specific information.

Purpose of the trip: \_\_\_\_\_  
\_\_\_\_\_

Destination: \_\_\_\_\_

Duration: \_\_\_\_\_

Who sponsored this travel?: \_\_\_\_\_  
\_\_\_\_\_

Investigator Statement:

I have read and understood [SIU's Financial Conflict of Interest on Federal Grants Policy](#) and have made all required financial interest disclosures; will submit a proposal for a Conflict of Interest Management Plan if necessary; and will comply with any conditions or restrictions imposed by the University to eliminate, reduce, or manage conflicts of interest regarding my research.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

When completed, please forward form to [ospa@siu.edu](mailto:ospa@siu.edu) **prior to submission of your proposal.**

---

**FOR OSPA USE ONLY**

Form Received: \_\_\_\_\_

Verified by Director of OSPA: \_\_\_\_\_ Date: \_\_\_\_\_

Forwarded to Dean: \_\_\_\_\_

Pend#/BP# \_\_\_\_\_