

CONFIDENTIAL

DISCLOSURE STATEMENT OF SIGNIFICANT FINANCIAL INTERESTS

**** FORM A ****

PROJECT TITLE: _____

SPONSOR: _____

A. EMPLOYEE IDENTIFICATION

Name: _____
 Last First MI

B. Employer _____
 School Department

SECTION A -- CONFLICT OF INTEREST

1. Ownership: Ownership interest in any corporation, partnership, trust, joint venture, and every other business interest, including land used for income which you, your spouse, or other members of your household have owned within the preceding 12 months, which represents a legal or equitable interest exceeding \$10,000 or five percent (5%), whichever is less. Ownership of intellectual property, e.g., patents, royalties, and copyrights are also covered.

Do you or your family have ownership interests, which meet this criterion?

No Yes (Disclosure sections C and D)

2. Compensation: Is defined as receipt of salary, anything of value, or economic benefit conferred in return for services rendered or to be rendered in excess of \$10,000, including consulting fees in excess of \$10,000 for any one entity. Have you or your family received compensation during the preceding 12 months which meet these criteria?

No Yes (Disclosure sections C and E)

3. Office: Have you or your family members held a position or office of director, officer, associate, partner, or proprietor in any outside entity for which more than \$10,000 compensation was received?

No Yes (Disclosure sections C and F)

4. Fees and Commissions: The threshold for significant financial interest is the receipt of an aggregate of \$10,000 or more in fees or commissions from one or more outside entities. Have you or your family members received fees/commissions, which meet these criteria?

No Yes (Disclosure sections C and G)

If you have answered "Yes" to any of these questions, indicating that a specific financial interest has the potential of affecting or influencing your research/educational activities, you are required to file a *Disclosure Statement Form B* identifying the specific interests and the affected research/educational activity. *Disclosure Statement Form B* is available from the Office of Sponsored Programs.

DECLARATION:

I, _____, declare that this Declaration of Conflict of Interest has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement. I have read and understand my employer's conflict of interest policy, and I understand that the intentional failure to file this statement as required or intentionally filing a false statement may result in disciplinary actions. Any changes to this statement will be reported prior to proposal submission.

Signature

Date

If all answers are "No," you can stop here. Submit this form—in a sealed envelope marked "*confidential*"--to Director of Grants and Sponsored Programs, Office of Sponsored Programs, Simmons University.