

Dickinson

Significant Financial Interest Disclosure Form

The following disclosure is made pursuant to the requirements of the Dickinson College [Financial Conflict of Interest \(FCOI\) in Research Policy](#). Investigators, as defined in the policy, must disclose any foreign and/or domestic Significant Financial Interest (SFI) and any foreign and/or domestic reimbursed or sponsored travel related to their institutional responsibilities. This form must be updated annually and within 30 days of discovering or acquiring a new SFI.

Please forward this completed/signed form to the Dickinson College Institutional Official's designee, the Sponsored Projects Office.

CERTIFICATION:

By submitting this form, I am certifying that I have read and understood Dickinson College's FCOI in Research Policy, and **I attest there is no SFI** by any part as defined. I understand that I am required to complete training on this policy every four years and that I must, at a minimum, update this form annually throughout the duration of applicable awards. If required, I will comply with conditions or restrictions imposed by Dickinson to manage conflicts. As an Investigator, should the scenario regarding my SFIs and/or reimbursed or sponsored travel related to my Institutional Responsibilities change, I agree to submit a revised disclosure form within 30 days of discovering or acquiring a new SFI.

By submitting this form, I am certifying that I have read and understood Dickinson College's FCOI in Research Policy, and **I attest there is an SFI**, which is disclosed on this form below. I also certify that the information provided in this form is true and correct to the best of my knowledge and belief. I understand that I am required to complete training on this policy every four years and that I must, at a minimum, update this form annually throughout the duration of applicable awards. If required, I will comply with conditions or restrictions imposed by Dickinson to manage conflicts. As an Investigator, should the scenario regarding my SFIs and/or reimbursed or sponsored travel related to my Institutional Responsibilities change, I agree to submit a revised disclosure form within 30 days of discovering or acquiring a new SFI.

Investigator's Printed Name:

Investigator's Signature: _____
(Electronic signature or typed name acceptable)

Date:

Please note, a separate form is required for each entity in which an SFI or sponsored/reimbursed travel is identified.

Investigator Name:

Department:

Name of Federal funder:

Project title:

Name of entity providing SFI or sponsored/reimbursed travel:

Location of entity providing SFI or sponsored/reimbursed travel:

Have you (or your spouse and dependent children) received any remuneration or have any equity interest with a publicly traded entity that when aggregated is valued at more than \$5,000 and that might reasonably appear to be related to your Institutional Responsibilities? (You do not need to include income from investment vehicles, such as mutual funds and retirement accounts, as long as you do not directly control the investment decisions made in these vehicles.)

Yes

No

Have you (or your spouse and dependent children) received any remuneration or have any equity interest with a non-publicly traded entity that when aggregated is valued at more than \$5,000 and that might reasonably appear to be related to your Institutional Responsibilities?

Yes

No

Do you (or your spouse and dependent children) have intellectual property rights and interests valued at more than \$5,000 and that might reasonably appear to be related to your Institutional Responsibilities?

Yes

No

Nature and value of SFIs that, when aggregated for the preceding 12 months, exceeds \$5,000:

Salary: \$

Royalties: \$

Licensing Fees: \$

Consulting Fees: \$

Honoraria: \$

Equity Interests: \$

Other (please indicate other type of SFI here:): \$

Explanatory notes (optional):

Reimbursed or sponsored travel that, when aggregated for the preceding 12 months, exceeds \$5,000:

Purpose of trip:

Destination:

Duration (in days):

Monetary value: \$

Explanatory notes (optional):