Significant Financial Interest Disclosure Form

West Chester University Office of Research and Sponsored Programs

Questions regarding this form can be sent to [research@wcupa.edu](mailto:research@wcupa.edu) or call 610-436-3557

All members of the WCU community share a commitment to uphold the University's core missions and values. Among these missions and values are assurance of personal and institutional integrity in the conduct of all academic duties; pursuit and communication of truth; independent, objective, and ethical scholarship and research; accountability for actions and conduct; and, preservation of the University's standing as an institution worthy of public confidence and trust. In seeking to uphold the highest standards of integrity and maintain the reputation of all faculty members and the University, WCU has enacted a Policy on Individual Financial Conflicts of Interest specific to the implementation of the August 25, 2011 Public Health Service Rule. In accordance with the Policy, complete the following brief disclosure of your financial interests to the best of your knowledge. This form must be filled out at least annually, and *within 30 days of any newly acquired significant financial interest*. All disclosures will be confidential and stored in a secure location. While you are in engaged in a project funded by the NSF or any of the agencies that follow the PHS rules for FCOI (42 CFR 50, Subpart F), training is also required once every four years.

*SECTION A:*

Name:

Phone Number:       Email address:

Department

*SECTION B:*

**(Please see attached Definitions)**

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| **1:** Do you (or your spouse or dependent children) have any **significant financial interest (SFI)**?  Please answer 'yes' if in the past twelve months, you (including family members) had a financial interest (including compensation) in a **related outside entity** of more than $5,000 in total and when aggregated by entity, *or*, if you or a family member currently hold equity of any amount in a privately-held for-profit related outside entity.  Yourself: Yes  No Your Family: Yes  No  If yes, please complete Section C for each entity in which you have a significant financial interest.  **2:** Have you – or a **family member** – served in a **fiduciary or management role** for a related outside entity in the past twelve months?  Yourself: Yes  No Your Family: Yes  No  If yes, please complete Section C for each entity in which you have a fiduciary role. |
| **3.** Did you receive any reimbursement for travel or sponsored travel related to your institutional responsibilities? For example, costs that were paid on your behalf and not reimbursed to you so that the exact monetary value may not be readily available and from an entity other than the following   * Federal, state, or local government agency, an * Institution of higher education as defined at 20 U.S.C. 1001(a), an * academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.   Yes  No |
| **4.** Do you or a member of your family have rights to and/or receive royalties from intellectual property (including, patents copyrights and trademarks but excluding academic or scholarly works) licensed to and/or owned by a for-profit entity? Do NOT include intellectual property owned or managed by WCU?  Yes  No |

*SECTION C*

If you answered YES to any questions above, describe the financial interest or affiliation and its relationship to this research project and your institutional responsibilities, in the space provided below. If the interest consists of money or something else of value that you or your family members have received or will receive, you must disclose the amount of money or value. If the interest consists of equity that you own, you must provide the current value (if any) of the equity and the percentage of ownership of the company that it represents. You may use the space below or attach an additional sheet if needed.

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| 1. Entity name from which you or your family received or will receive remuneration: (please use additional pages for each separate entity)      1. I, or a family member, have received salary, consulting fees, honoraria, gifts or other benefits, "in kind" compensation, reimbursements in excess of reasonable costs, or other remuneration from this entity in the past twelve months. Yes  No   If yes, please indicate the aggregate dollar amount of your (and any family members) compensation received from this entity in the last twelve months.   1. I, or a family member, hold equity(including stock, stock options, or other ownership) interests in this entity. Yes  No   If yes, please indicate the aggregate dollar value of your (and any family members) **equity** interests in this entity.   1. I, or a family member, have received royalties, license fees, or similar payments from intellectual property rights from this entity in the last twelve months. Yes  No   If yes, please indicate the aggregate dollar value of your (and any family members) intellectual property related payments from this entity in the last twelve months.   1. Does this entity own, license, market or sell a product or technology that you research as part of your institutional responsibilities? Yes  No   If "yes", please describe the product or technology and how it relates to your research.     1. I, or a family member, had a fiduciary or management role with this entity in the past twelve months. Yes  No   If yes, please state which family member(s) holds the interest identified above (e.g. self, spouse, dependent child), and the type of position held.   1. Does this entity relate to research for which you receive funding from the National Science Foundation, US Public Health Service or any of the other agencies listed online at <http://sites.nationalacademies.org/PGA/fdp/PGA_070596> ? Yes  No   Please use this space to provide any additional information that you believe may relate to your disclosure         PHS Travel Disclosure   * Dollar amount or value: * Purpose of trip: * Sponsor Name: * Destination: * Duration: |

# Investigator Certification

By signing below, the Investigator hereby certifies that all of the information contained on this form is true and correct to the best of his or her knowledge and that he or she has made reasonable efforts to assure that accurate and complete information has been provided.

I have read and understand WCU’s policy on Conflict of Interest ((<http://wcupa.edu/research/researchCompliance.aspx> ), and have completed this report to the best of knowledge and belief, and if required, I will comply with any conditions or restrictions imposed by the institution name here to manage any real or perceived conflicts. Should my outside financial or managerial interests, or those of my Family, change in a way that results in different answers to any of the questions asked in this report, I agree to submit a revision.

Signature:

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| Investigator Typed name: Click here to enter text. |  | Date |

**DEFINITIONS**

**Family:** Spouse and dependent children of the investigator.

**Federally Funded**: any funding: i.e. grant, cooperative grant, contract, received from any United States government agency, department or entity

**Fiduciary or Management Role** means service as an officer, director or service on an advisory board (including scientific advisory boards), whether paid or unpaid. Investigators may need prior approval from the Dean before assuming such responsibilities. “Fiduciary or management role” does not mean service on an editorial board. In their implementation plans, schools may extend this requirement to include service on the board or advisory panel of a not for profit entity.

**Financial Interest**means anything of monetary value, whether or not the value is readily ascertainable (42 CFR 50.603).

**Investigator:**the project director or principal investigator and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of research funded by the PHS, or proposed for such funding, which may include, for example, collaborators or consultants.

**Intellectual Property:** as defined in the APSCUF CBA, including any term used to describe the patents, copyrights, mask work protection, trade secrets, and plant variety protection certificates, which cover, or pertain to, inventions.

**Institutional Responsibilities** means an individual’s professional responsibilities on behalf of WCU. Such responsibilities include, but are not limited to: research, research consultation, teaching, professional practice, institutional committee memberships, and service on committees or panels such as research ethics committees (e.g. Institutional Review Boards, Institutional Animal Care and Use Committees) and other bodies monitoring the conduct of research. (42 CFR 50.603)

**Related Outside Entity** means an entity in which a person has a significant financial interest that may, or may reasonably appear to an outside observer, to influence the discharge of teaching, research, or other University-related responsibilities. In determining relatedness, individuals should employ a standard of common sense, and when in doubt, disclose. Examples of entities that might be related are those:

(1) whose products, services or activities are related to the areas of a faculty member’s or an investigator’s teaching or research;

(2) that fund research in a faculty member’s or an investigator’s area of academic interest;

(3) that own or have rights to develop intellectual property that is the subject of research in which a faculty member or an investigator participates;

(4) that compete commercially with such an entity as described in (3);

(5) that make or propose to make a gift to the University that would support a faculty member’s or an investigator’s teaching or research activities;

(6) that furnish products or services to the University through a contractual process in which a faculty member or an investigator or participates in any way;

(7) that propose to enter a licensing agreement with the University with respect to technology invented by the faculty member or investigator;

(8) that act as a legal or de facto agent for any outside entity engaged in any of the above activities.

**Significant financial interest:** A Financial Interest consisting of one or more of the following interests of the Investigator (and those of the Investigator’s spouse and dependent children) that reasonably appears to an outside observer, to influence the discharge of teaching, research, or other University-related responsibilities.

1. With regard to any publicly traded entity, a Significant Financial Interest exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure and the value of any equity interest in the entity as of the date of disclosure, when aggregated, exceeds $5,000. For purposes of this definition, remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship); equity interest includes any stock, stock option, or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value;
2. With regard to any non-publicly traded entity, a Significant Financial Interest exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure, when aggregated, exceeds $5,000, or when the Investigator (or the Investigator’s spouse or dependent children) holds any equity interest (e.g., stock, stock option, or other ownership interest).
3. For PHS-funded projects, investigators also must disclose the occurrence of any reimbursed or sponsored travel (i.e., that which is paid on behalf of the Investigator and not reimbursed to the Investigator so that the exact monetary value may not be readily available), related to their Institutional Responsibilities, provided; however, that this disclosure requirement does not apply to travel that is reimbursed or sponsored by a federal, state, or local government agency, an institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education
4. Intellectual property rights and interests (e.g., patents, copyrights), upon receipt of income related to such rights and interests.

Exclusions from this definition:

(a) Salary, royalties, or other remuneration paid by the Institution to the Investigator if the Investigator is currently employed or otherwise appointed by the Institution;

(b) Intellectual Property Rights assigned to the Institution and agreements to share in royalties related to such rights;

(c) Any ownership interest in the Institution held by the Investigator, if the Institution is a commercial or for-profit organization;

(d) Income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles;

(e) Income from seminars, lectures, or teaching engagements sponsored by a federal, state or local government agency, an institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education; or

(f) Income from service on advisory committees or review panels for a federal, state or local government agency, institution of higher education as defied at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.