

## \*UNI Conflicts of Interest and Commitment Reporting Form

**Instructions:** Before completing this form, please read UNI Policy 9.03 (Conflicts of Interest). Respond to the questions for yourself and/or your spouse/partner and any dependent children, for the last 12 month period.

**Today's Date:** \_\_\_\_\_

**Individual Reporting:** \_\_\_\_\_

**Title or Position:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Organization (if not UNI):** \_\_\_\_\_

If this form is being completed pursuant to a specific sponsored project award or IRB project, provide the name of the funder (if applicable), the award or IRB number (as applicable), the expected period of performance of the project or award, and the name of principal investigator (if other than yourself) on a separate sheet and attach to this form.

### **FINANCIAL AND OTHER EXTERNAL INTERESTS**

**1. Do you or any of your immediate family members (spouses/partners and children) hold an office or directorship in a for-profit or nonprofit organization?**

YES OR NO

Name of organization(s): \_\_\_\_\_

Position(s) held: \_\_\_\_\_

Business of the organization(s): \_\_\_\_\_

If officer or director, list the amount of compensation: \_\_\_\_\_

**2. Do you or any of your family members receive consulting income or honorariums totaling \$ 10,000 or more from a single source (\$ 5,000, if disclosure is related to PHS funding)?**

YES OR NO

Source(s): \_\_\_\_\_

Business of the organization(s): \_\_\_\_\_

Total compensation from each source: \_\_\_\_\_

**3. Do you or your family members hold any intellectual property rights?**

YES OR NO

Description of rights: \_\_\_\_\_

**4. Do you or any of your family members hold more than a 5 percent financial interest in any business venture (including publicly held corporations)?**

YES OR NO

Name of venture(s): \_\_\_\_\_

Business of the organization(s): \_\_\_\_\_

**5. Has any outside entity paid for or reimbursed personal or business travel for you or any of your family members?(except those paid for by your employer, by governmental agencies, or by other universities)?**

YES OR NO

If so, provide sponsor/organizer, purpose of trip, destination, duration, and amount paid: \_\_\_\_\_

**POTENTIAL CONFLICTS**

**6. Does any organization or venture listed in your response to items 1-5 compete or do business directly or indirectly with the University of Northern Iowa? If so, please explain:**

\_\_\_\_\_  
\_\_\_\_\_

**7. Are your responsibilities for any of the organizations or ventures listed in your response to items 1-5 similar to OR potentially affecting OR affected by your university responsibilities? If so, please explain:**

\_\_\_\_\_  
\_\_\_\_\_

**8. Do they affect OR are they affected by sponsored funding? If so, in what way, and which agency?**

\_\_\_\_\_  
\_\_\_\_\_

**9. Are there any other external interests that you may believe may cause a potential conflict with your responsibilities with the university OR on a particular sponsored project? If so, briefly describe:**

\_\_\_\_\_  
\_\_\_\_\_

**ACKNOWLEDGMENTS AND SIGNATURES**

**I acknowledge that I have read and understand the UNI Policy on Conflicts of Interest and Commitments, and have made all necessary disclosures.**

**Your Signature:** \_\_\_\_\_

**Department Head Signature:** \_\_\_\_\_

**Signature, Date, and any Comments of the Conflict of Interest Officer:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will a COI Management Plan be necessary?                      Yes                      No

Form may be signed by hand or digitally. After departmental signature is obtained, **mail this form to Tolif Hunt**, Conflict of Interest Officer (COIO), Office of Research and Sponsored Programs, 213 East Bartlett Hall, mail code 0394, or **scan and email** to [tolif.hunt@uni.edu](mailto:tolif.hunt@uni.edu). Questions may be directed to Tolif Hunt at 319-273-3217.

\* When this form is used for non-UNI employee project collaborators, when an affiliation, duty, responsibility or financial connection to UNI should be interpreted as an affiliation, duty, responsibility or financial connection to the project and project activities for which this form is being completed.