

Cleveland State University Significant Financial Interests Disclosure Form

Effective Date: October 15, 2003

This Form is used to disclose significant financial interests for CSU-based projects. As a CSU employee, you must also abide by the Ohio Ethics Law: <http://ethics.ohio.gov/OhioEthicsLaw.html>

Name: _____ Department/Unit: _____

University Title: _____ College: _____

Proposal Title: _____

Funding Agency: _____

Disclosure: Herewith I am disclosing the details of the significant financial interests identified below. My significant financial interest(s), as defined in Section II(6) of the Policy involves the following:

_____ Salary or other payments for services rendered

_____ Intellectual property rights

_____ Equity interest(s)

_____ other significant financial interests

Was this conflict identified before or during proposal submission? Yes No

↳ If No, provide a brief explanation of how and when you became aware of the conflict (use additional sheets as necessary).

Affirmation: In support of this disclosure, I am providing appropriate documentation in the attached confidential envelope. I attest that the information includes any and all significant financial conflicts of which I am aware at this time. I agree to revise this disclosure, add to it, or correct it as needed during the time period the proposed project is being considered by the funding agency through the performance of the project should it be funded, and if additional significant financial interests are obtained. I agree to cooperate in the development of a Memorandum of Understanding to manage the identified conflicts of significant financial interests as described in Section IV(D) of the CSU Policy on Conflicts of Interests. Accordingly, I agree to comply fully with any restrictions or conditions imposed by the University on the conduct of the sponsored project or on the reporting of the results from the sponsored project as specified in the resulting Memorandum of Understanding.

Investigator Signature: _____ Date: _____

Endorsements: I have reviewed the disclosure, recommend that it will be possible to manage the identified conflicts, and agree to cooperate in the development of a Memorandum of Understanding to manage them.

Department Chair/Center Director: _____ Date: _____

Academic Dean: _____ Date: _____