

For the Development of a conflict of Interest Resolution Plan and Memorandum of Understanding

Name_			College/So	chool			
Date S	ubmitte	d:	Dept./ Unit	t:			
1.	 Please provide documentation identifying the busin and the nature and amount of the financial interest. 			ess enterprise or entity (company involved			
		Information already Significant Financia Disclosure Form.			Documentation Attached.		
1a.	affected externation	d by the research, edu al sponsor; or will any t reasonably appear to	ucational, or service act disclosed significant fin	tivities fu iancial in earch, e	terest reasonably appear to be nded, or proposed for funding by ar terest in an entity whose financial ducational or service activities		
		Yes			No		
	Ple	ease Explain:					
2.	Are you		npany in which you have	e a finan	cial interest (hereafter the		
		Yes			No		
2a.	If yes, v	_	sibilities, and how much	ı time do	you expect to dedicate to the		



3.	Are you a member of the governing board of directors for the company?					
		Yes		No		
3a.	If Yes,	describe the general nature of the board and yo	our res	sponsibilities as a board member.		
4 .	5 41-		C	0		
4. l	Joes th	e company plan to submit proposals for federal	tunair	ng?		
		Yes		No		
4a.	If yes,	is it for research which could be performed in yo	our lab	poratory at the University?		
		Yes		No		
4b.	If yes,	please provide a brief explanation of why it shou	ıld no	t be performed by the University.		
_	_					
5.	Do you	ı intend to employ any undergraduate or gradua	te stu	dents at the Company?		
		Yes		No		
5a.		for each student, please describe: a) the nature elates to the student's studies or thesis, and c) the				
6.	6. Does the company intend to sponsor any work at the University?					
		Yes		No		
	If yes, will it be necessary or preferable for the work to be performed in your laboratory?					
		Yes		No		
	Please	e explain.				



7.	Descri manufa	be the significance of the research to any comme acture.	ercia	I product that the company will sell or		
8.	papers	u agree to disclose your relationship in company you submit regarding the research, and abide by s or organizations?				
	□ Note	Yes Disclosure in all publications or presentations is required when	□ nen di	No isseminating results of any clinical trial study.		
9.	(please	and/or your cognizant University administrator be e see attached guidelines), please name a collea , who would be willing to review your research p	gue,	preferably within your department or		
10.	(please college	and/or your cognizant University administrator be see attached guidelines), please name a collea, who would be willing to provide oversight during adherence to protocol and other sound scientific	gue g the	preferably with your department or education of the research project to		
11.	. Have you obtained the concurrence of the person(s) listed in numbers 9 and 10 above to serve in the capacity of reviewer/overseer?					
		Yes		No		
12.	Do you	Do you intend to use any University facilities on behalf of the company?				
		Yes		No		
12a.	the nat	please list each piece of equipment (including pr cure and extent of the use, and the physical locat g and room number).	oper ion c	rty tag number) which will be used, of the equipment (i.e., name of the		



Signature	Date	Signature (Dean or Director)	Date
Faculty Member/ Employee	Please Print	Cognizant University Administrator	Please Print
16a. If yes, please describe the agreement and its		our consulting responsibilities, and attaintellectual property.	ach a copy
16. Are you intending to or do □ Yes	you now serve as a c	onsultant to the company? □ No	
		e potential effect your research may ha oriate controls governing the trading or	
	ey are subject to the	the number of shares, the percentage stollowing: 1) anti-dilution provisions; agreements.	share
13. Please list all University cl of your Company.	erical and/or service s	staff support you intend to utilize for or	on behalf
12b. Please attach a list of the administrator.	equipment use charg	es obtained from your cognizant acad	emic