

Emory College Conflict of Interest and Commitment Annual Disclosure Form

NAME: _____ DEPT/PROG: _____ DATE: _____

All full-time College faculty members (tenured, tenure-track, lecture-track) must complete **all sections** of this form annually. After completing the form, please sign and date the certification statement, then submit it to your chair or program director for review and signature. Forms are returned to the College Office each spring with faculty evaluations. Approval of proposals and acceptance of awards may be withheld pending receipt of a current disclosure form. In addition, you must route through your chair and disclose to Emory College Grants Management any new potential or actual conflict of interest within ten (10) days of your learning of it. The College Policy on Conflict of Interest and Conflict of Commitment is available at http://www.college.emory.edu/about/planning/grants/college_policy.html#3.

Direct questions to Patricia Bauer, Senior Associate Dean of Research, 2-8460; or Teresa Sussman, Associate Director of Grants Management, 7-0749.

A. CONSULTING AND OTHER EXTERNAL COMMITMENTS

Please list all consulting agreements, outside employment, expert witness services, membership on profit-based advisory boards, and other profit-generating external professional activities, and any services performed or products created and/or sold for which remuneration in any form is received from a person, firm or corporation other than Emory University. University policy stipulates that all such agreements be reviewed and approved by the Department Chair or Program Director prior to forwarding to the Dean.

DO NOT report royalties (except as noted in Section B, below), honoraria, or the like received for traditional faculty responsibilities such as preparing papers, speeches, evaluations, articles, scripts, musical scores, books & graphic works for publication, performance, oral presentation, peer review. These are considered a part of a faculty member's University employment and are not subject to annual reporting.

Activity and/or Name of Entity or Other Employment	Agreement Duration (6 mos, 1 yr, renewable, etc.)	Chair Approval (Y/N)	Days Committed / Academic Yr.

B. BOOK ROYALTIES

Have you received royalties for a book you have assigned to a class you are teaching or supervising?

YES _____ (complete the rest of Section B) NO _____ (continue with Section C)

If you have received royalties for a book you have assigned to a class you are teaching or supervising, please list information below:

Title	Class	Royalty amount	Other Information

C. FINANCIAL DISCLOSURE

YES	NO	
		<p>Do you, your spouse, or your dependents have any type of financial or ownership interests (including stocks or other equity interest) or receive remuneration or compensation (exceeding \$10,000 in current value or 1% equity) in any entity related to a current or proposed research project? Do not disclose funds received from a research grant that support salary or interests held by a mutual fund or funds administered by a third party.</p> <p>An entity related to a current or proposed research project means any:</p> <ul style="list-style-type: none"> (A) Supplier of equipment, materials, or services related to the research; or (B) Business commercializing a product that the research is intended to evaluate or further develop; or (C) Party whose financial interests would seem to be directly and significantly affected by the research; or (D) Sponsor of your research.
IF YES, PLEASE DESCRIBE		

D. INTELLECTUAL PROPERTY

YES	NO	
		Are you the inventor, co-inventor, or creator of intellectual property licensed through Emory University?
		Is this intellectual property the subject matter of or related to any externally sponsored research project with which you are involved?
		Do you receive royalties from the external sponsor of any of your research projects?
IF YES, PLEASE DESCRIBE		

Certification

I hereby certify that the above information is true to the best of my knowledge. I understand that I have an obligation to inform my Chair and Dean in writing if my answers to any of the above questions change during the calendar year.

Signature of Faculty Member Date

Signature of Chair Date

Name of Faculty Member (Printed) Date

Name of Chair (Printed) Date

YOUR CHAIR/PROGRAM DIRECTOR WILL RETURN THIS FORM TO THE COLLEGE OFFICE ALONG WITH YOUR ANNUAL EVALUATION.