

INVESTIGATOR FINANCIAL INTEREST DISCLOSURE FORM

INSTRUCTIONS: In accordance with the New York University [Policy on Academic Conflict of Interest and Conflict of Commitment](#) effective July 1, 2011, **all Investigators must disclose their significant financial interests and revise their Annual Disclosure Form (faculty only), as necessary, to be current, and submit this Investigator Financial Interest Disclosure Form for Research and Other Sponsored Projects to their school dean or his/her designee prior to submission of any proposal. This applies even if an Investigator has no financial interest to disclose.** Investigator, as used in the Policy, includes the principal investigator or program director, co-investigator, and any other person who applies for or receives funds for a Sponsored Project at NYU, or who is responsible for the design, conduct or reporting of a Sponsored Project, or who is directly involved in treatment or evaluation of research subjects, or who is responsible for determining eligibility criteria of human subjects or for obtaining the informed consent of research subjects..

The completed form(s) must be submitted in accordance with the implementation procedures adopted by the University and your school dean. The office designated by your dean to receive the proposal will review this form. If it is determined by the Dean or his or her designee that any Conflict of Interest (including any Significant Financial Interest) has been disclosed, the packet will be referred to the appropriate Committee for review and evaluation as contemplated by the Policy.

Principal Investigator:	PI School/Department:	PI Telephone:
Investigator/Key Personnel:	School/Department:	Telephone:
Proposal Title:		
Sponsor:	Is this Human Subjects Research?: Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Is this Pre-Clinical Research (i.e. research reasonably anticipated to contribute to an FDA application for research involving human subjects within the next 12 months)?: Yes <input type="checkbox"/> No <input type="checkbox"/>	
<p><u>Significant Financial Interests:</u> Answer the questions below based on interests held by you and your Immediate Family Members as they relate to Affected Entities. As generally defined by the Policy, an Affected Entity is an entity other than NYU that would reasonably appear to be affected by, or might in turn affect, your NYU responsibilities, including teaching, research, clinical, or service. It also includes entities that control, are controlled by, or are under common control with the Affected Entity. Research sponsors will normally be an Affected Entity. Immediate Family Members, as used in this policy, include an individual's spouse or domestic partner or person in a civil union or similar relationship, dependent children, and any other family members residing in the same household.</p>		
1. EMPLOYMENT/MANAGEMENT ROLE		
Do you or does any member of your immediate family have an employee, officer, director, trustee, manager or equivalent role in a business or entity, such as the research sponsor, that would reasonably appear to be affected by, or might in turn affect, this project?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. PUBLICLY TRADED ENTITIES		

<p>With regard to any publicly traded entity that is an Affected Entity, do you and your Immediate Family Members have, in the aggregate, EITHER (a) more than \$5,000 in the combination of (i) salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship, travel reimbursement) received from the entity in the twelve months preceding the disclosure (or expected to be received from the entity in the twelve months following the disclosure) and(ii) financial or ownership interest in the entity, including stock, stock option, partnership or LLP interest, or other ownership interests, OR (b) more than five percent (5%) in any class of the entity’s securities? NOTE: For research involving human subjects, all payments and ownership must be disclosed regardless of the amount received or owned.</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>If yes, is the Affected Entity a business or entity, such as the research sponsor, that would reasonably appear to be affected by, or might in turn affect, this project?</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>If yes, provide details, as instructed in part 5, below.</p>		

3. NON-PUBLICLY TRADED ENTITIES

<p>With regard to any non-publicly traded entity that is an Affected Entity, do you and your Immediate Family Members have, in the aggregate, EITHER (a) more than \$5,000 in salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship, travel reimbursement) received from the entity in the twelve months preceding the disclosure (or expected to be received from the entity in the twelve months following the disclosure), or (b) ANY financial or ownership interest in the entity, including stock, stock option, partnership or LLP interest, or other ownership interests? NOTE: For research involving human subjects, all payments and ownership must be disclosed regardless of the amount received or owned.</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>If yes, is the Affected Entity a business or entity, such as the research sponsor, that would reasonably appear to be affected by, or might in turn affect, this project?</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>If yes, provide details, as instructed in part 5, below.</p>		

4. INTELLECTUAL PROPERTY RIGHTS

<p>Do you or your Immediate Family Members have intellectual property rights (e.g., patent or copyrights), royalties from such rights, or agreements to share in royalties related to such rights (including any right to royalty income from intellectual property assigned to NYU under NYU’s intellectual property policies) that would affect or reasonably appear to be affected by, or might in turn affect, your institutional responsibilities, including your teaching, research, clinical, or service?</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>If yes, are the intellectual property rights held in intellectual property covering products or processes being used in this project?</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>If yes, provide details, as instructed in part 5, below.</p>		

5. SUPPLEMENTAL INFORMATION

If you answered ‘Yes’ to any of the foregoing questions, please provide specific information regarding each applicable significant financial interest on a separate page. If you answer ‘Yes’ to the first question of Part 2 or Part 3 and answered ‘No’ to the second question of such Part, update your [Annual Disclosure Form](#), as necessary. For all other disclosures, in addition to the name of the affected entity(ies), please attach an explanation of why each Affected Entity is affected or may be affected by the study, the nature and amount of the financial interest, and note whether there are any students, residents, trainees or post-docs participating in the project.

6. CERTIFICATION

I certify that the above information is complete and true to the best of my knowledge and that I have read and agree to abide by the University’s *Policy on Academic Conflict of interest and Conflict of Commitment* as it pertains to me and I understand and

will comply with its requirements. If I am the Principal Investigator/Project Director, I further certify that all other Investigators I intend to appoint will file an Investigator Financial Interest Disclosure Form in accordance with the Policy.

I acknowledge my obligation while the project remains ongoing to submit an updated Investigator Financial Interest Disclosure Form at each continuation or renewal of this project and prior to obtaining any new financial interest in the project.

Signature of Investigator

Date