FCOI File No.:	
Date received:	

## Form A – Part 1

## Confidential Eastern Illinois University PHS Financial Conflict of Interest (FCOI) Disclosure Form\*

1.	nvestigator Name:	
	Status: Faculty Student Staff Other—specify:	
	Mailing address:	
	Phone: E-mail:	
	Department or Unit	
2.	PHS Project Title:	
3.	Check one box to indicate the type of disclosure you are making:	
	☐ Initial ☐ Annual ☐ New Financial Interest ☐ Retrospective	
1.	<ol> <li>Disclosure of Financial Interests</li> <li>In making this disclosure, do not include any of the following items:         <ol> <li>Salary, royalties or other remuneration paid by EIU to the investigator</li> <li>Intellectual property rights that have been assigned to EIU and agreements to share in royalties produced by such rights.</li> <li>Income from investment vehicles such as mutual funds and retirement accounts, provided the investigator does not control the investment decisions made in these vehicles.</li> <li>Income from seminars, lectures, or teaching engagements sponsored by a federal, state, or local government agency, an institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.</li> </ol> </li> <li>Income from service on advisory committees or review panels for a federal, state, or local government agency, institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.</li> </ol>	ch
	<ul> <li>Check all of the following that were true of you, your spouse, and/or any dependent children at any tim during the past 12 months or since you last submitted an FCOI disclosure, whichever is shorter.</li> <li>Financial Interest in a publicly traded entity: exists if the total of remuneration from and equity in the entity exceeds \$5,000.</li> </ul>	e
	Financial Interest in a non-publicly traded entity: exists if there is any equity at all or if total remuneration from the entity exceeds \$5,000.	
	Financial Interest in intellectual property rights (e.g., patents and copyrights): exists if there is more than \$5,000 of income related to such rights that are not assigned to EIU.	
	Financial Interest in travel: exists if you travelled and received reimbursement or sponsorship from a source other than EIU.	
	C. No Financial Interest Check if none of the types of Financial Interest listed in Part B were true of you, your spouse, and/o any dependent children during the past 12 months or since you last submitted an FCOI disclosure, whichever is shorter.	or

## 5. Investigator Assurance

Comments:

I agree to abide by Eastern's Financial Conflict of Interest Policy. In submitting this form and any other required documents I certify that the information provided is true to the best of my knowledge. I supply this information for confidential review by Eastern Illinois University and for such other limited purposes as are required by law, regulation, or contract. I do not authorize release of it for any other purpose. I understand and agree that if there is a material change (an acquisition of a significant financial interest) to this information, I must submit a new disclosure and attachment within 30 days of that change.

Signature:	Date:
What should I do next?  If you checked only box 4. C., no further disclosu "Confidential" to the director of the Office of Res	are is required. Please mail this form in an envelope marked search and Sponsored Programs.
	separate Form A – Part 2 for each financial interest covered by art 1 and all copies of Form A – Part 2 in an envelope marked search and Sponsored Programs.
What response can I expect?  If you checked only box 4. C., no response will b	e sent to you.
information. The Dean of the Graduate School widiscussion. If any of your financial interests meet	he Office of Research and Sponsored Programs will review your ill review your information and, if necessary, contact you for the criteria for a Financial Conflict of Interest (FCOI), the Dean nanagement plan. You will receive written communication of all mation.
	linois University must collect and analyze in order to qualify for S). This form includes some language taken directly from a form
Reviewed by ORSP:	
Signature	Date