

ROGER WILLIAMS UNIVERSITY
CONFLICT OF INTEREST DISCLOSURE FORM

Name: _____

Title: _____

University Affiliation: _____

Please indicate the following: Initial Disclosure Annual Disclosure Update

Please answer all questions. Refer to the Conflict of Interest Policy as needed. For “yes” answers please provide details on a separate sheet of paper. Remember, if in doubt, it is always in your best interest to disclose.

Yes No

Do you or any member of your immediate family¹ have a consulting relationship or position with, or a financial interest in, any of the following:

 a sponsor of your research?

 a business that your work at RWU could either advance, evaluate or further develop (e.g. a business that markets, produces or has in pre-market testing a commercial product or product line)?

 any other business in which there could be an appearance of a conflict of interest or which could reasonably appear to be affected by your research interests or educational activities?

 Apart from any items disclosed above, have you performed consulting or engaged in outside employment during the past year?

 Do you or any member of your immediate family have outside (non-RWU) professional or income producing activities involving either RWU students or staff?

 Do you or any member of your immediate family have a relationship or hold a position or appointment with, or a financial interest in, any entity that – to the best of your knowledge - does business, or is seeking to do business, with RWU?

¹ “Immediate family” is your spouse, or domestic partner (consistent with University health benefits policy and procedure) and dependent children, including stepchildren.

- ___ ___ During the past year, have you or any member of your immediate family accepted any gift (including cash), favor, services, travel, entertainment, or hospitality with a value in excess of \$50 from any individual or entity that – to the best of your knowledge - does business, or is seeking to do business, with RWU?
- ___ ___ During the past year, have you utilized RWU facilities or resources, or time during working hours, for non-RWU pursuits or purposes?
- ___ ___ Do you have any familial relationships with RWU students or staff where you are in a position to influence (directly or indirectly) their academic, economic or employment standing with the University?
- ___ ___ Is there any other potential, apparent or real *financial* conflict that could result in a personal financial benefit to you or any member of your immediate family, as related to any personal influence you have in RWU operations, academic or business decisions?
- ___ ___ Do you or any member of your immediate family have any *other* potential, apparent or real non-financial conflict, including relationships, commitments or participation in activities, including uncompensated activities, that may compromise your decisions or judgment in carrying out your RWU responsibilities?
- ___ ___ Is there any other relationship or are there or matters or activities of which you wish to make RWU aware in the context of the Conflict of Interest Policy

AFFIRMATION

I affirm that I have reviewed the Conflict of Interest Policy, that I understand the Conflict of Interest Policy, and that the information provided in this Disclosure and any attached pages is true, accurate, and complete to the best of my knowledge.

Signature: _____ Date: _____

RETURN this form and any attached additional pages of disclosure items to your supervisor or the Office of General Counsel.

For questions or additional information please contact the Office of the General Counsel at x5379.