## CONFIDENTIAL Seattle University Financial Conflict of Interest Annual Disclosure Form

This form is confidential and may be reviewed only by the appropriate Department Head/Director/Dean and others as designated in the SU Financial Conflict of Interest policy. Originals are submitted to the Office of Sponsored Projects. Copies may be made only by the signer and by the Office of Sponsored Projects, and originals and copies maintained only in their respective filing systems.

Projects, and originals and copies maintained only in their respective filing sy	systems.
PLEAS	SE PRINT
Name:	Disclosure Date:
	Report for the 12-month period prior to date of submission
Rank/Title:	SU ID #:
School or College:	FTE:
Department:	
Email:	Campus Phone:
responsibilities? "Family member" means spouse, domestic p  Question: In the last 12 months, did you or your family member entity that:	ents, royalties, etc.) that is or may be related to my institutional partner and/or dependent children.  er, alone or in combination, have <u>significant financial interest</u> in an hat could reasonably appear to be affected by your research or
<ul> <li>has made or pledged a gift to the Seattle University that benefits your research or sponsored program,</li> </ul>	A <u>significant financial interest</u> involves:  (a) receiving compensation during the year over \$5,000 or  (b) having an aguity interest valued at every
<ul> <li>sponsors your research or your program,</li> </ul>	(b) having an equity interest valued at over \$5,000 in a publicly traded entity or
<ul> <li>sells goods or services to the University that will be used in your research or sponsored program, or</li> </ul>	(c) having an equity interest of any value in a non-publicly traded entity.
<ul> <li>has another involvement in your research or sponsored program (such as a consulting agreement)?</li> </ul>	(This does not include 'indirect' equity interest or ownership through mutual funds.)
Question: In the last 12 months was your travel reimbursed or higher education, medical center or related entity related to you	
NO TO ALL QUESTIONS. Your disclosure is complet	ete. Please sign and submit this form.
	ete a FCOI Disclosure Attachment for each external entity in which there in which you have an interest. Submit all forms together. The
certify that the information provided is true to the best of my k University, and for such other limited purposes and disclosures as	st policy. In submitting this form and disclosure attachments, if required, knowledge. I supply this information for confidential review by Seattle are required by law, regulation, or contract. I do not authorize release to e is a material change (an acquisition of a significant financial interest) thin 30 days of that change.
Signature:	Date:

SUBMIT THIS FORM: Via Campus Mail/U.S. Mail: Office of Sponsored Projects, Seattle University, PO Box 222000, Seattle, WA 98122.

Via Email: Send to OSP@seattleu.edu. If you choose to submit via email, please be advised that email is not a secure or confidential communication medium. By submitting your FCOI form by email, you acknowledge that the University cannot guarantee the security or confidentiality of the email, and you assume all risk of loss.