

PTF Addendum A

Co-Principal Investigator (Co-PI)/Project Director (PD)/ Other Key Personnel

Co-Principal Investigator/Project Director (Co-PI/PD)

College/Center and Department

Email

Project Title

Sponsor

SU Lead Principal Investigator/ Director

SU Personnel Effort and Compensation:

I am staff or faculty on a 12-month appointment requesting time release via salary subvention.

I am a faculty member requesting course release during the academic year.

I am a faculty member requesting summer pay during the grant period.

Compliance Requirements

U.S.	Non-U.S.	What is your Nationality? <i>(If Non-U.S., OSP will direct the PI to complete Addendum C, the Export Control Checklist)</i>
Yes	No	Are you a member of the Society of Jesus (Jesuit)? <i>(If yes, the proposed budget must not include fringe benefits on their salary)</i>
Yes	No	Is the sponsor of this project the NSF or NIH? <i>(If yes, please complete Addendum E, Notification Requirements Regarding Findings of Sexual Harassment, Other Forms of Harassment, or Sexual Assault)</i>

Co-PI/PD Required Certifications

As PI/PD on this proposed project I, _____, attest that:

1. I am not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from current transactions by any Federal department or agency;
2. I have received, read, understand and will abide by [Seattle University's policies](#) regarding externally funded sponsored awards.
3. I agree to be bound by the terms and conditions of the externally funded sponsored award which supports this activity;
4. I understand I am responsible for the financial stewardship of any sponsored award resulting from this application and that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties; and
5. I agree to accept responsibility for the scientific and/or programmatic conduct of this project and to provide the required progress reports if the proposal is awarded.

Financial Conflict of Interest Certification

In accordance with our Financial Conflict of Interest policy, all named PI(s) must submit a financial conflict of interest disclosure at the time of submission. Responding to the below questions and certifying this form will satisfy this requirement.

1. In the last 12 months did you or your family member (meaning spouse, domestic partner and/or dependent children), alone or in combination, have an outside interest in any asset of potential monetary value (e.g., intellectual property rights, patents, royalties, etc.) that is or may be related to my institutional responsibilities?

2. In the last 12 months, did you or your family member, alone or in combination, have *significant financial interest* in an entity that:

- has products, services, technology or research interests that could reasonably appear to be affected by your research or sponsored program
- has made or pledged a gift to the Seattle University that benefits your research or sponsored program,
- sponsors your research or your program,
- sells goods or services to the University that will be used in your research or sponsored program, or
- has another involvement in your research or sponsored program (such as a consulting agreement)?

A *significant financial interest* involves:

- a) receiving compensation during the year over \$5,000 or
- b) having an equity interest valued at over \$5,000 in a publicly traded entity or
- c) having an equity interest of any value in a non-publicly traded entity.

(This does not include 'indirect' equity interest or ownership through mutual funds.)

3. In the last 12 months was your travel reimbursed or sponsored other than by a government entity, institution of higher education, medical center or related entity related to your institutional responsibilities?

NO TO ALL QUESTIONS. Your disclosure is complete.

YES TO ANY QUESTION. Sign this form and complete a [FCOI Disclosure Attachment](#) for each external entity in which there is a significant financial interest or for each asset in which you have an interest. Submit directly to OSP.

My signature below certifies to the above statements and that to the best of my knowledge all information submitted within this proposal is true, complete and accurate.

Co-Principal Investigator/Project Director/ Other Key or Named SU Personnel

Date

REQUIRED COLLEGE APPROVALS (Co-PI/PD to obtain prior to submitting to OSP)

By signing below, I certify that I:

- reviewed the above referenced proposal;
- confirm that the proposed project is consistent with center, departmental, college and/or university mission, practices, policies, and priorities; and
- approve of all commitments described in the proposal including those involving personnel, release time, space, equipment, cost sharing, and conflict of interest.

Department Chair (If applicable)

Date

Dean / Director / Supervisor

Date