Conflict of Interest – Investigator Financial Disclosure Statement

As an applicant to a federal granting agency, you will need to submit this form to the Dean of the Faculty before your proposal can be submitted through the College. All investigators/senior personnel who are responsible for the design, conduct or reporting of the research or educational activities proposed for federal funding must provide this information, not just the PI. Please read the College policy on financial disclosure in the Bates Faculty Handbook and indicate below whether or not you have any conflicts of interest. If you receive a federal award, you will need to complete this form annually for the duration of the grant.

We are collecting this information to comply with federal grant management requirements. It is not submitted with the proposal, and it remains confidential unless needed for resolving a conflict or if requested by a government agency.

I hereby certify that I have read the Financial Disclosure Policy on the Dean of the Faculty’s Web site which is effective for all federal proposals submitted through the College.

☐ I certify to the best of my knowledge that neither I nor my spouse, partner, or dependents hold any significant financial interests that would reasonably be affected by the research or educational activities proposed for or currently supported by federal funding, or in any entities whose financial interests would reasonably be affected by such activities.

☐ I have the following relationships, affiliations, activities, or interests (financial or otherwise) which constitute potential conflicts under federal conflict of interest regulations.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

If any situations arise, of which I am aware, that are in any way contradictory to the above statement, I will immediately notify the Dean of the Faculty, who is the College’s responsible representative, and make full disclosure of any conflict, real or potential.

Name and Position: __________________________
Title of Proposal: ____________________________
Investigator Signature: ______________________ Date: __________
Bates Representative: ________________________ Date: __________