



Metropolitan State University of Denver

Financial Conflict of Interest (FCOI) Disclosure Form for Sponsored Research

Purpose:

To comply with federal regulations and MSU Denver policy, all Investigators involved in sponsored research must disclose significant financial interests (SFI) that may present an actual, potential, or perceived conflict of interest related to their institutional responsibilities. OSRP must have disclosures prior to submitting your proposal for external funding. The completed and signed disclosure form should be included with the sponsored proposal/application routing packet. It is the responsibility of the Investigator to file a revised disclosure form with the Office of Sponsored Research & Programs (OSRP) annually or within thirty days of discovering or acquiring a material change in the significant financial interests or obligations previously disclosed.

Training Requirement: Investigators are required to complete conflict of interest training before engaging in grant-related work, and again every four years during any grant-funded award. The required training is available on-line through the Collaborative Institutional Training Initiative (CITI). You will need to affiliate your training with MSU Denver so that we receive notification from CITI when you have completed the training. To access CITI, go to the CITI website, complete the "Conflicts of Interest" module.

DISCLOSURE EXCEPTIONS – DO NOT INCLUDE the following when disclosing financial interests:

- Salary, royalties, or other remuneration paid by MSU Denver to you, to your spouse and/or to dependent children (as applicable) if you are currently employed by MSU Denver;
- Income related to intellectual property rights assigned to MSU Denver or to agreements to share in royalties related to such rights;
- Income from investment vehicles such as mutual funds and retirement accounts for which you, your spouse and dependent children do not directly control the investment decisions made in such vehicles
- Income from seminars, lectures, or teaching engagements sponsored by a Federal, state, or local government agency, an institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education

- Income from service on advisory committees or review panels for 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

You need to report only those Significant Financial Interests that are directly related to your responsibilities as an employee of Metropolitan State University of Denver.

Information:

- **Name:** _____
- **Title/Position:** _____
- **Department/College:** _____
- **Sponsor/Funding Agency:** _____
- **Project Title:** _____
- **Grant/Contract Number (if available):** _____
- **Email:** _____

If this project is a subaward to MSU Denver, the funding originates from:

NSF PHS Other

Check one:

Initial disclosure

Update disclosing new significant financial interests

Required annual update significant financial interests

Disclosure of Significant Financial Interests (SFI)

For purposes of this form, an SFI includes financial interests (including those of your spouse or dependent children) that reasonably appear related to your institutional responsibilities and meet one or more of the thresholds below.

Please answer the following questions:

1. Equity Interests

- Do you, your spouse, or dependent children hold any equity interest (e.g., stock, stock options, ownership) that exceeds 5% ownership or is valued at **more than \$5,000** in a publicly traded entity that is related to your institutional responsibilities?

Yes No

If yes, describe: _____

- Do you hold **any equity interest** in a non-publicly traded entity that is related to your institutional responsibilities?

Yes No

If yes, describe: _____

2. Compensation

- Have you, your spouse, or dependent children received (or do you expect to receive) **compensation exceeding \$5,000** in the past 12 months from any entity related to your institutional responsibilities (Exclude payments from MSU, or for teaching engagements and governmental advisory committee.)?

Yes No

If yes, describe: _____

3. Intellectual Property

- Do you receive income related to intellectual property rights (patents, copyrights, licensing fees, royalties) that are related to your institutional responsibilities?

Yes No

If yes, describe: _____

4. Travel (PHS-funded projects only)

- Have you received **sponsored or reimbursed travel** related to your institutional responsibilities from an entity other than MSU Denver, a U.S. federal/state/local government agency, a U.S. university, or an academic medical center?

Yes No

If yes, provide sponsor, purpose, destination, and duration:

5. Other Relationships/Commitments

- Are there any other financial relationships or outside commitments that could reasonably be perceived to affect, or appear to affect, the design, conduct, or reporting of sponsored research?

Yes No

If yes, describe: _____

Certification and Acknowledgement

I certify that:

- The information provided above is true and complete to the best of my knowledge.
- I will update this disclosure annually and within **30 days** of acquiring a new Significant Financial Interest.
- I understand that failure to disclose may result in sanctions under MSU Denver policy and federal regulations.

I understand that significant financial interests disclosed here do not necessarily constitute a financial conflict of interest, and I may be asked to provide additional information if it is needed to determine whether a financial conflict of interest does exist.

Signature: _____ Date: _____

Review and Determination (For Administrative Use Only)

No FCOI identified

FCOI identified – management plan required (attached)

Additional review required by the Designated Official

Reviewer Name/Title: _____

Reviewer Signature: _____ Date: _____

Please email the completed form to the OSRP Executive Director at LAMUSALINI@msudenver.edu