# CONFLICT of INTEREST MANAGEMENT PLAN

## Part 1 – To be completed by the employee

Name Click or tap here to enter text. Employee ID # Click or tap here to enter text.

Position Click or tap here to enter text. Department Click or tap here to enter text.

**Background:** *Explain the potential conflict of interest or conflict of commitment. Include names of any companies where a conflict may exist:*

Click or tap here to enter text.

**1. Publications and Presentations**: *Explain how publications and presentations will be presented, and the relationship between the company and the university:*

Click or tap here to enter text.

**2. Interactions with Students and Other Personnel:** *Describe interaction with students and other personnel, including supervisory responsibilities, graduate students, and employment of students by the outside company named in the management plan. Provide for informing students of their right to bring any concerns about the employee’s relationship with the company named in this Conflict of Interest Management Plan to the Dean of the College. Assess the impact of the disclosure on a graduate student’s progress toward a degree, and how this will take place:*

Click or tap here to enter text.

**3. Role in the Company:** *Describe the role that the employee plays in the company named in the Conflict of Interest Management Plan:*

Click or tap here to enter text.

**4. Research Support from the Abovementioned Company:** *Describe any research support (grants, contracts, unrestricted gifts, or material) that the above-mentioned company will offer to the University.*

Click or tap here to enter text.

**5. Reporting of Extramural Financial Interests and Inventions:** *Describe the financial interest held in the above-named company.*

Click or tap here to enter text.

**6. Conflict of Commitment:** *Describe how any perceived conflict of commitment will be managed.*

Click or tap here to enter text.

**7. Change in Circumstances:** *Provide an update of the disclosure due to any significant change in relationships.*

Click or tap here to enter text.

**8. Outside Activities Agreement:** *Describe how the outside activity is in compliance with university policy and whether it has been approved using the standard annual approval process.*

Click or tap here to enter text.

**9. Use of University Facilities and Services:** *Include a statement that any activity involving the use of University facilities or services for the benefit of the above mentioned company will be conducted in accordance with all relevant university policies pertaining to the use of University facilities. Provide for the use of a written facilities use agreement to be approved before an activity begins.*

Click or tap here to enter text.

**10. Purchases:** *Describe any involvement in decision making regarding purchases that concern the above mentioned company.*

Click or tap here to enter text.

**11. Annual Review:** I*nclude a provision for an annual meeting with the department chair and Dean of the College to review this information. A new plan must be submitted to Human Resources when changes occur.*

Click or tap here to enter text.

Valid for the Academic Year annotated above. **This form will not be accepted without the Supervisor signature**.

\_\_\_\_\_\_\_ \_\_\_\_\_\_

Signature of Employee Date

## Part 2 – To be completed by the supervisor

I hereby certify that the preceding information provided by the faculty or staff member is accurate and I hereby approve this request.

Signature of Supervisor Date

## Part 3 – To be approved by COI Committee

□ Approved by \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Initial Date