# **Public Health Service Conflict of Interest Form**



#### Do I have a Financial Conflict of Interest under the Public Health Service Regulations?

Effective August 24, 2012, disclosures by persons applying for or receiving funding from any PHS agency will be evaluated by PHS regulations regarding significant interest in non-Clemson entities.

These regulations are stricter than for other funding agencies. PHS regulations apply to current interests, and interests in the 12 months preceding the disclosure, rather than interests that are anticipated in the future.

This document and training must be completed and submitted to phscoiadmin@clemson.edu prior to submitting PHS proposals. Also before engaging in PHS funded research with a Notice of Award date (including noncompeting continuations) of 8-24-12 or later, the PHS-COI office must have the disclosure on file , and if necessary, a COI management plan must be in place.

Investigator Name:	Email:
Title:	Phone:
Department:	College/Division:
Signature:	

#### Part 1: Am I considered an Investigator under the PHS definition?

In my role for any anticipated proposals or any awarded PHS funding:	Yes	No	Unsure
I am responsible, fully or partially, for the <b>design, conduct, or reporting of</b>			
research.			
If you answered Vest you are considered on Investigator under the DUC rules. De			

ou answered Yes, you are considered an Investigator under the PHS rules. Please move to Part 2 If you answered NO, CONGRATULATIONS you are done completing this form.

### Part 2: Do I have a "Significant Financial Interest" (SFI) as defined by PHS?

You may have a SFI as defined by PHS if any of the following situations apply to you, your spouse, domestic partner, or your dependent children. The next two statements pertain to entities that engage in activities that are, or could reasonably be perceived by non-experts as being, related to or similar to your university responsibilities:

For any ONE entity, the value of my (our) <b>salary</b> or payment for services	Yes	No	Unsure
for the previous 12 months, <i>plus</i> the value of my (our) equity interest,			
<i>plus</i> income related to intellectual property rights or interests exceeds			
<u>\$5,000</u> .			
*Do not include income from or equity in investment vehicles such as mutual funds long as none of you directly controls the investment decisions made in those vehicle *Do not include intellectual property income paid by the CU Research Foundation ( If Yes or Unsure, provide the name of the entity or entities:	es.	ement acc	ounts, as
I (we) have an equity interest in a non-publicly traded entity (or entities)	Yes	No	Unsure
(e.g., stock, stock option, or other ownership interest).			
(e.g., stock, stock option, or other ownership interest). If Yes or Unsure, provide the name of the entity or entities:			



#### Part 3: Are my SFIs related to my institutional responsibilities?

Briefly describe your institutional responsibilities at Clemson University.

Please provide the following information for each entity you entered in Part 2. If you require additional space to list your SFIs, please attach additional pages.

Entity #1	
Legal name of the entity which provided the income	
or in which you have an equity interest:	
Briefly describe the value and the activity of the	
entity.	
,	
Describe how the activities of the entity relate to, are	
from your Clemson University institutional responsibi	lities.
Entity #2	
Legal name of the entity which provided the income	
or in which you have an equity interest:	
Briefly describe the value and the activity of the	
entity.	
Describe how the activities of the entity relate to, are	
from your Clemson University institutional responsibi	lities.
Entity #3	
Legal name of the entity which provided the income	
or in which you have an equity interest:	
Briefly describe the value and the activity of the	
entity.	
,	
Describe how the activities of the entity relate to, are	
from your Clemson University institutional responsibi	lities.



## Part 4: Do I have a SFI as defined by PHS with regard to travel?

The next statement pertains to travel expenses paid by an entity or entities that engage in activities that are, or could reasonably be perceived by non-experts as being, related to or similar to your university responsibilities:

In the past 12 months, I have been reimbursed for travel or have had travel Yes No Unsure paid on my behalf by an entity other than Clemson University; a grant or contract to Clemson University; a US federal, state, or government agency; other US institution of higher education; an academic teaching hospital; a medical center; or a research institute that is affiliated with a US institution of higher education. \*Any payment of travel expenses that meets this definition, no matter how minor, constitutes a SFI according

to PHS rules and must be reported.

\*Current rules do **not** require the reporting of travel by spouses, domestic partners, and dependent children.

*If Yes or Unsure, provide the name of the entity or entities and complete Part 5 below.* 

If you answered Yes or Unsure to the question in Part 4, you may have a SFI under the PHS rules. This interest must be reviewed by the PHS-Conflict of Interest Committee to determine whether it constitutes FCOI for the relevant entities you listed above. Please continue Part 5.

If all of the responses are No, Congratulations - you have completed the PHS COI Disclosure.

### Part 5: PHS Travel Disclosure

Please provide the following information for each instance of travel for which you answered Yes in Part 4.

If you require additional space to list your SFIs, please attach additional pages.

Purpose of Trip	Sponsor or Organization	Destination	Month and Duration	Value

If your answers indicate that you may have a Financial Conflict of Interest as defined by PHS, the PHS-COI Administrator will contact you to discuss your situation.