AUBURN UNIVERSITY CONFLICT OF INTEREST DISCLOSURE FORM

| Á Á | I Science Foundation (INSF)E |
|--|--|
| NEW | |
| UPDATE | |
| Investigator's Full Name | Date |
| Employee ID Number | |
| Department | |
| School/College | |
| Sponsoring Agency | |
| Title of project | |
| Proposed/Awarded amount | |
| Proposal/Award numerical identifier | |
| The purpose of this disclosure statement is for investigation to their research or educational activities funded by the and/or their proposed protocol for the use of human subconforms to current Federal guidelines requiring limited review of the disclosure by a responsible university representation to help the appropriate Reviewer determined the university can manage, reduce, or eliminate the confidence of the statement is for investigation and their new statement in the statement is for investigation and their new statement is for investigation and their new statement in the statement is for investigation and their new statement in the statement is for investigation and their new statement in the statement is for investigation and their new statement is statement in the statement in the statement in the statement is statement in the statement in the statement in the statement is statement in the statement in the statement in the statement is statement in the statement in the statement in the statement is statement in the statement in the statement in the statement is statement in the statement in the statement in the statement is statement in the statement in the statement in the statement is statement in the statement | financial interests and their commitment Part National Science Foundation (NSF) Spects in research. This statement and targeted financial disclosure and Part National Sesentative. This statement discloses |
| 1. Are you or a member of your immediate family, a agent, or in any managerial position in any business ent might affect or be affected by your activities under the re | erprise outside of Auburn University that |
| Yes (If Yes, describe in detail the nature and sheet.) | extent of the affiliation on an attached |
| No | |
| 2. Are you or your spouse or dependents the actual percent (5%) of the voting stock or controlling interest of academic interest or specialization as it specifically related | f any Business Enterprise in your field of |
| Yes (If Yes, describe in detail the nature and sheet.) | extent of the affiliation on an attached |
| No | |
| 3. Have you or your spouse or dependents collectively | y derived more than \$10,000 in income |

within the past year or do you or any member of your immediate family anticipate deriving

| ollectively income exceeding \$10,000 per year from any business enterprise in your field cademic interest or specialization as it specifically relates to the referenced proposal or award |
|--|
| Yes (If Yes, describe in detail the nature and extent of the affiliation on an attache heet.) |
| No |
| . Do you or members of your immediate family have any other significant financial interest not only of the payments for services, equity interest, and/or intellectual property right any business enterprise in your field of academic interest or specialization as it specificall elates to the referenced proposal or award? |
| Yes (If Yes, describe in detail the nature and extent of the affiliation on an attache sheet.) |
| No. |
| ERTIFICATION: have read and understand the Auburn University Disclosure Form for NSF-funded rojects; have made all financial disclosures required; and will comply with any conditions o |
| estrictions imposed to manage, reduce or eliminate actual or potential conflicts of interests. |
| estrictions imposed to manage, reduce or eliminate actual or potential conflicts of interests. Signature:Date |
| Date |
| Date |
| EVIEWER'S CERTIFICATION: I certify that to the best of my knowledge the person named above has disclosed a eportable outside interests and activities, as related to the referenced proposal or awar ponsored by the NSF or protocol submitted for IRB review. I further certify that I have eviewed the disclosure and have determined: no conflict exists any conflict has been managed, reduced, or eliminated the conflict cannot be resolved, please notify the sponsoring agency. Additional |
| EEVIEWER'S CERTIFICATION: I certify that to the best of my knowledge the person named above has disclosed a eportable outside interests and activities, as related to the referenced proposal or awar ponsored by the NSF or protocol submitted for IRB review. I further certify that I have eviewed the disclosure and have determined: no conflict exists any conflict has been managed, reduced, or eliminated the conflict cannot be resolved, please notify the sponsoring agency. Additional information is attached. |
| EEVIEWER'S CERTIFICATION: I certify that to the best of my knowledge the person named above has disclosed a eportable outside interests and activities, as related to the referenced proposal or awar ponsored by the NSF or protocol submitted for IRB review. I further certify that I have eviewed the disclosure and have determined: no conflict exists any conflict has been managed, reduced, or eliminated the conflict cannot be resolved, please notify the sponsoring agency. Additional information is attached. Signature: |

AUBURN UNIVERSITY CONFLICT OF INTEREST DISCLOSURE FORM INVESTIGATOR'S ANNUAL STATEMENT

| Investigator's Full Name | Date |
|---|---|
| Employee ID Number | |
| Department | |
| School/College | |
| Sponsoring Agency | |
| Title of project | |
| | |
| Proposed/Awarded amount | |
| Proposal/Award numerical identifier | |
| INVESTIGATOR'S CERTIFICATION | |
| The following is an accurate and curre interests and activities, as related to the reference. | ent statement of my reportable outside erenced proposal or award. |
| Signature | Date |
| Typed/Printed name: | |
| No changes to current disclosure | on file |
| Updated disclosure attached. | |