

UNIVERSITY OF DAYTON
CONFLICT OF INTEREST & COMMITMENT DISCLOSURE FORM

EMPLOYEE NAME:

DIVISION/DEPARTMENT:

EMPLOYEE CLASSIFICATION:

University employees must complete or update this form annually to disclose current relationships with outside organizations that may be perceived as a conflict of interest or commitment based on the information provided in the UD Conflict of Interest & Commitment Policy for Sponsored Research Programs ("Policy"). This information will be reviewed to determine if a conflict exists; if it does, a resolution will be provided. Any changes during the year that may give rise to a conflict must be disclosed on an updated form. Please answer Yes or No to each question below, sign as indicated, and return the completed form to your supervisor.

	Yes*	No
Are you employed by, or have an ownership interest in, a competitor, or a potential competitor to UD or UDRI?		
If a relationship as described above exists, does it require your attention and/or active participation during the normal workday?		
Have you accepted or been offered any remuneration in excess of \$100 (gifts, payments, or services) from any company seeking to do business with the University of Dayton?		
Have you offered any remuneration in excess of \$100 (gifts, payments, or services) to any company doing business with the University of Dayton?		
Have you placed business or were influential in placing business with a firm owned or controlled by a University of Dayton employee or his/her family?		
Have you acted as a paid consultant in the past 12 months or are you currently acting as a paid consultant to any University of Dayton customer or supplier?		
Are you actively participating in and/or directing part or all of a UD research project for a sponsor where you or an immediate family member are employed or have a significant financial interest?		
Do you have a significant financial interest in any company with which the University conducts business? (see Section (f) of Policy for additional details)		
Do you undertake any business activity outside of the normal workday that could impact your performance on the job at UD?		
Are there any other related matters of which you wish to make the University aware that may be perceived as a conflict of interest or commitment?		
*If you answered Yes to any of the questions, please provide details below (attach separate page if needed):		

I have answered the above questions to the best of my ability and will promptly submit an updated form in the event of changes.

Employee signature:

Date:

SUPERVISOR NAME:

No conflict of interest or commitment exists. *No further action needed.*

Conflict exists. *Please attach proposed resolution. Resolution shall be subject to review and approval by the RI Director's Office (RI employees) or the Office for Research (faculty).*

Supervisor signature:

Date: