ADELPHI UNIVERSITY RESEARCH FINANCIAL CONFLICT OF INTEREST (FCOI) DISCLOSURE FORM

The purpose of this financial conflict of interest form is to provide Adelphi University and the Investigator with information to determine whether a real or possible FCOI exists pursuant to the university's FCOI policy.

Your n		
Your e	(last) email: phon	(first) e:
Departi	tment: Scho	ol:
	ng Funded Proposal?yesnoBudget	Dates:
	icant Financial Interests (see FCOI policy for detailed ctual property rights, and sponsored travel)	definitions - \$5,000 or more in remuneration, equity,
1.	Do you or does any member(s) of your immediate family (spouse or dependent children) have a financial conflict of interest that: (1) would reasonably appear to affect your research?yesno; (2) is in an entity whose financial interests would reasonably appear to affect your interest?yesno	
2.	If yes to any part of question 1 above, is there salary or payment involved? Please describe	
3.	If yes to any part of question 1 above, is there any equity (stocks, stock options, etc.,) involved? Please describe	
4.	Do you or any member(s) of your immediate family (spouse or dependent children) have any intellectual property rights and any royalties from such rights that would reasonably represent a conflict of interest in terms of your research?yes,no. If yes, please explain	

5. Have you or any member(s) of your immediate family (spouse or dependent children) been sponsored or