#### UNIVERSITY OF CENTRAL FLORIDA POTENTIAL OUTSIDE ACTIVITY, EMPLOYMENT, AND CONFLICT OF INTEREST AND COMMITMENT REPORT

## For <u>A&P, Adjunct Faculty,</u> <u>OPS, and USPS employees</u> assigned to and/or supporting sponsored programs

## activities & Students assigned to sponsored and non-sponsored research

[If you have more than one activity for each question, you will need to complete a separate disclosure for each activity]

Employee: Select your employee type:	Select type of disclosure:
A&P Employee	New annual disclosure
<ul> <li>OPS Adjunct Faculty</li> <li>OPS Temporary research personnel (other than Student) (Refer to Page 11)</li> </ul>	Amendment to disclosure
Student	
	Reporting Period:
Department/Institute/Center:	August 1, 2011 through December 31, 2012 (Revised form effective August 24, 2012)

#### PURPOSE:

UCF has established policies and procedures to identify and properly manage potential conflicts of interest that may be associated to non-faculty university employees who are engaged in sponsored program activity and student engaged in sponsored and non-sponsored research. Such procedures are intended to increase awareness of the fact that potential conflicts of interest (COI), including financial, and conflicts of commitment (COC) shall be avoided while carrying out their professional work, including participating in research efforts at UCF. Any reported and/or identified potential conflict shall be avoided or properly managed. UCF operates within a frame-work regulated by state and federal requirements. State and federal laws and regulations have been developed to define the governing and monitoring requirements for the handling of conflicts of interest involving significant financial interests, outside activities or conflicts of commitment. This form conforms to federal regulations relating to financial conflicts of interest; Florida Statutes; policies of the Board of Governors (BOG) and the University of Central Florida (UCF).

For purposes of this COI & COC disclosure form, any university A&P, Adjunct Faculty, OPS and USPS employees ("DISCLOSER"), who is directly assigned to and/or is administratively supporting a sponsored project or related activity is required to complete a COI & COC disclosure form. In addition, any student enrolled at the university (*undergraduate, graduate and doctoral*) is subject to COI reporting, whether or not he/she is engaged in sponsored program activity if any of the two criteria listed below applies: the student is assigned to sponsored program activity and the Principal Investigator and/or any Co-Principal Investigator of the sponsored project determines that the student is involved in the design, conduct or reporting of research results; or the student has a financial interest, is involved in any activity or has an affiliation with an external entity that might be considered or perceived as a conflict of interest in regard to a company providing funding to UCF. Other criteria may apply and the ORC's Director of Compliance and the COI Program staff will assess each student's specific situation (on a one-to-one basis).

The purpose of the required submission of COI & COC disclosure by the UCF employee is to ensure that no unresolved conflict(s) involving their financial interests or primary university commitments and outside activities exists among employees holding employment classifications as defined above.

Information provided by DISCLOSERS under this COI & COC disclosure form will allow their supervisors in conjunction with the ORC's Office of Compliance/Conflict of Interest Program (COI), to determine whether a potential conflict exists so that they may manage or eliminate such conflict. If a potential conflict that could directly and significantly affect the **design**, **conduct or reporting** of the research is identified upon review by your supervisor or other appropriate university officials, the DISCLOSER will be notified and the conflict must be resolved. This revised CY2012 COI disclosure form incorporates mandatory changes established by new federal financial conflict of interest regulations that became effective on August 24, 2012. For additional details, access: <a href="http://grants.nih.gov/grants/policy/coi/fcoi\_final\_rule.pdf">http://grants.nih.gov/grants/policy/coi/fcoi\_final\_rule.pdf</a>.

If you have any questions regarding the non-faculty COI disclosure process at UCF, please contact the COI program staff at coi@ucf.edu

#### PROCEDURE

- The COI & COC's disclosure form must be completed <u>annually</u>, regardless of whether or not the employee or student has any significant financial interests, outside activities, or commitments to report.
- Any changes occurring during the COI reporting period must be disclosed via an Amendment, using this same form by selecting "<u>Amendment to Disclosure</u>" under section "type of disclosure" located at top of Page 1. Notification of any change(s) to the disclosure shall be submitted immediately after identification, and <u>no</u> <u>later than 30 days</u> of discovering, acquiring, or committing to a new financial interest or commitment.

Information on policies, regulations, and requirements is available on the UCF's Office of Compliance/COI Program website at http: <u>www.coi.ucf.edu</u>.

Refer to Pages 10-11 for a description of most relevant definitions and criteria applicable to the content of this form.

**NOTE**: For each question answered "**Yes**" below, <u>all</u> sub-questions that appear are required and must be answered. Multiple responses may be submitted to each question. Use additional pages (if necessary) to complete your disclosure statement.

## I. Sponsored and Non-Sponsored Research

The university promotes objectivity in research by establishing policies and procedures that provide a reasonable expectation that the design conduct and reporting of research will be free from bias resulting from an investigator financial conflict of interest,

Questions 1, 2 & 3 apply to an investigator planning to participate (proposal application) in or is engages in the design, conduct and/or reporting of the research.

1. During the reporting period do you or your Immediate Family have a financial interest related to your Institutional responsibilities, in a publically or non-publically traded entity in the form or remuneration and/or equity interest, that when aggregated, equals or exceeds \$5,000? [See reporting exclusions] (New employees should report remuneration and/or equity interests received in the last 12 months and during the current reporting period)

🗌 Yes 🗌 No

(If "No", proceed to the next question.)

If "Yes", provide the following information:

•	Entity name (Source of remuneration):
	Party receiving the remuneration: Self, or Immediate Family member both
	If "Immediate Family member", please identify family relationship:
•	Position type:
	President CEO CTO Board Member Director/Chief Research Officer
	Scientific Advisory Board Member 🛛 Manager/Officer/Partner 🗋 Other (provide details):
•	Type of remuneration:
	🗌 Salary 🔲 Paid authorship 🔄 Stock Options 📄 Consulting Fees 📄 Stock 🔲 Stock Options
	Honoraria Other ownership interest (describe below):
•	Anticipated duration: Start date: to: End Date:
	Specify the anticipated time commitment to the activity:
	# hours: Hours are: Per Week Per Month Per Year
	Describe how the activity interacts with your assigned duties at UCF:

<ul> <li>Has <u>or</u> will the entity <b>sponsor your research</b> and/or execute a license agreement to use your intellectual property?</li> <li>Yes</li> <li>No</li> </ul>
If "Yes", select 🔲 Research sponsor 👘 License agreement
If "Research Sponsor", please identify the UCF Project No.(s): ; ; ; ;
If "License agreement", please identify license number and title: or License Agreement currently under negotiation with ORC Technology Transfer Office
• Is the remuneration for services from the sponsor of a covered clinical study?  Yes No
If "Yes", please describe:
If "Yes", is <u>or</u> will the amount of remuneration exceed \$25,000?  Yes No
Describe in detail your role and responsibilities (including legal or employment relationship) with the entity:
[Specific to disclosure by Students]: Is your Academic Advisor engaged with this entity?     Yes     No
2. During the current reporting period have you been reimbursed, either directly or on your behalf for any extramural <u>travel that is related</u> to your institutional responsibilities? [See reporting exclusions] (New employees should report the value of extramural travel (paid directly to you or on your behalf) in the last 12 months and during the current reporting period).
Yes No     No     (If "No", proceed to the next question.)     If "Yes", please provide the following information:
Entity name supporting travel:     Travel destination:;;
Travel Purpose:
3. Will the value of intellectual property rights (e.g. patents, copyrights, trademarks), upon receipt of income to you and/or your immediate family, during the reporting period, equal or exceed \$5,000 [See reporting exclusions] (New employees should report intellectual property rights received in the last 12 months and during the current reporting period).
□ Yes □ No
(If "No", proceed to the next question.)
If "Yes", please provide the following information:
Entity name:
Identify type of IP:     Patents     Royalties     Royalty Options     Option to receive Intellectual Property rights     Copyrights     Trademark
Party developing or who owns IP: Self Immediate Family member Both

•	Short description of the property:
	Describe in detail your role and responsibilities with the entity:
	e of UCF Students, Personnel, or Other University Resources ., equipment, facilities, supplies) in <u>Outside</u> <u>Activities</u>
	nt reporting period, do you or an immediate family member intend to use the services of UCF students <u>or</u> personnel for pervisory or evaluative responsibilities at UCF, in carrying out any outside activity?
	Use (e.g

# 🗆 No □ Yes (If "No", proceed to the next question.) If "Yes, Please complete the following information: Name of university student(s) or personnel: (first & last name): • \_\_\_ Last : \_\_\_\_\_ Unit: \_\_\_\_\_ (1) First: • Describe your supervisory/evaluative role: Describe your current or proposed use of the university student or personnel: • Specify the anticipated university student/personnel time commitment for the outside activity (information should correlate to the name listed under number 4.1 above): (a) # hours: \_\_\_\_\_ Hours are: Der Week Per Month Per Year Indicate the time (s) of the day, week, or month when this activity occurs and how the described activity interacts with your assigned duties: other: (a) From \_\_\_\_\_ Describe: (2) First: \_\_\_\_\_ Last: \_\_\_\_\_ Unit: \_\_\_\_\_ Describe your supervisory/evaluative role: Describe your current or proposed use of the university student or personnel: Specify the anticipated university student/personnel time commitment for the outside activity (information should correlate to the name listed under #4.2 above): Per Year (a) # hours: \_\_\_\_\_ Hours are: Der Week Per Month

					weekly	monthly	—
	Describe:						· · · · · · · · · · · · · · · · · · ·
(3) First: _			Last:		Unit:		
Describe yo	ur supervisory/	evaluative role:					
Describe yo	ur current or pr	oposed use of the	e university st	udent or person	nel:		
	-		rsonnel time o	commitment for	the <u>outside acti</u>	vity (information	should correlate to the nam
	number 4.3 ab s: Ho	ove): ours are:             Per V	Veek [	Per Month	🗌 Per Yea	r	
		day, week, or mo			and how the deso	cribed activity inte ☐ monthly	eracts with your assigned du □ other:
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## 6. During the current reporting period will you hold or do you expect to run for political office?

🗌 Yes 🗌 No

(If "No", proceed to the next question.)

If "Yes", identify political office held or sought, as applicable:

			n disclosure	(revAug2012)
Describe the political o	ffice:			
Anticipated duration:	Start date:	to: End Date:	:	
Number of hours:				
Indicate the time(s) of t	he day, week, or month w	hen this activity occurs and how the descri	bed activity in	teracts with your

COL diaglogung

□ d	laily	weekly	monthly	□ othe	er: Describe:					
Campaigning ac	ctivities:	☐ Yes		No						
lf "Yes	s", descri	be and please	provide the follo	wing info	rmation : _					
Anticipated du	ration:	Start date:		to:	End Date: _		i	:		
Number of hou			or month when t	his activit	v occurs and	how the	describer	1 activity ir	teracts with	VOUR
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other: Describe:

to

#### daily weekly

assigned duties: From \_\_\_\_\_

## IV. Florida State Conflict of Interest Standards of Conduct

monthly

Florida State conflict of interest statutes (FS 112.311) requires that no employee shall have any interest, financial or otherwise, direct or indirect; engage in any business transaction or professional activity; or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties in the public interest. In concert with the Florida Statute, please answer the following Standards of Conduct (FS 112.313) questions:

7. During the current reporting period do you intend to commit university resources (i. e. personnel, materials and supplies, equipment use, departmental or project funds) to purchase goods and services from or provide services to any entity in which you or your Immediate Family are an officer, partner, or proprietor of the entity, have a material interest (direct or indirect ownership) of 5% or more of the total assets or capital stock of any business entity, and/or hold any employment or contractual relationship with the entity?. You must report proposed subcontract SBIR/STTR sponsored funding activity to the university from any entity owned or managed by you and/or your "≠aa YX]UhY":Ua]`nia Ya VYfg"

□ Yes □ No

(If "No", proceed to the next question.)

If "Yes", please provide the following information:

Entity name:\_

,	Is the entity sponsoring research in which you are engaged at the university?	☐ Yes	🗆 No	
	If "Yes", please provide the university Project No(s):	;;		

•	Does the entity have intellectual property rights?	🗌 Yes	🗆 No	
	If "Yes", please identify the university License a	greement: (Nu	mber and title:	

	Are you or your Immediate Famil	Von Officer Dert	nor Doord mombor	Director or Droprieto	r of the optitu?
,	Are you or your immediate Famil	v an Onicer. Part	ner, board member.	Director or Proprieto	r or the entity?

□ Yes 🗆 No

If "Yes", please select the position held:

Self:	President CEO	🗆 сто	Director	Chief R	esearch Officer
	Scientific Advisory Board	I Member	Manager/Officer	Partner	Other (provide details):

Immediate Family member : 
President CEO 🗆 СТО Director

Other (provide details):
If "Immediate family member", describe family member relationship:
Do you or your Immediate Family have a Material Interest ( <i>direct or indirect ownership of <u>5% or more</u> of the total assets or capital stock of any business entity):     Yes     No</i>
If "Yes" select Party: 🔲 Self 🛛 Immediate Family member 🔲 Both
If "Immediate Family member", describe family member relationship:
Do you or your Immediate Family hold any employment or contractual relationship with the entity?:     Yes No
If "Yes", describe the contractual relationship:
Party: Self, or Immediate Family member
If "Immediate Family member" describe family relationship:
In accordance with FS 112.313(12)(a) - (j) exemptions, are you exempt?: Ves No
If "No", you must submit your request for exemption in accordance with Florida Statutes 112.311-313, Title 42, CFR, Part 50.604.
[A copy of the Request for an Exemption/Disclosure form is available at: http://www.coi.ucf.edu/Forms/COI_Request_for_Exemption.doc] Check here if a Request for an Exemption/Disclosure form is being submitted as an attachment to this form.
witness, company officer? If you are an independent consultant, please indicate "Independent consultant" in the description of the activity and the name of each entity you are performing consulting services for.
(If "No", proceed to Certification)
If "Yes", please provide the following information:
If "Yes", please provide the following information:  Entity Name:(Please provide the name of the entity:
If "Yes", please provide the following information:  Entity Name:(Please provide the name of the entity:
If "Yes", please provide the following information:   Entity Name:(Please provide the name of the entity:
If "Yes", please provide the following information:  Entity Name:(Please provide the name of the entity:
If "Yes", please provide the following information:  Entity Name:(Please provide the name of the entity:
If "Yes", please provide the following information:         • Entity Name: (Please provide the name of the entity:

If "Yes" select Party:       Self       Immediate Family member or       Both         If "Immediate Family member", describe the Material Interest:	Do you or your Immediate F	amily have a Material Interest: 🔲 Yes 🗌 No
If "Immediate Family member" describe family member relationship:	If "Yes" select Party:	Self Immediate Family member or Both
Do you or your Immediate Family hold any employment or contractual relationship with the entiry?	If "Immediate Family m	ember", describe the Material Interest:
□ Yes       □ No         If "Yes", describe the contractual relationship:	If "Immediate Family m	ember" describe family member relationship:
If "Yes", describe the contractual relationship: If "Yes" select Party: Self Immediate Family member or both If "Immediate Family" member, describe family relationship: Do you or your Immediate Family an officer, partner, director or proprietor of the entity? Yes No If "Yes", describe the position held: If "Yes" select Party: Self Immediate Family member or both	Do you or your Immediate F	amily hold any employment or contractual relationship with the entiry?
If "Yes" select Party: Self Immediate Family member or both If "Immediate Family" member, describe family relationship: Do you or your Immediate Family an officer, partner, director or proprietor of the entity? Yes No If "Yes", describe the position held: If "Yes" select Party: Self Immediate Family member or both		🗌 Yes 🗌 No
If "Immediate Family" member, describe family relationship:	If "Yes", describe the c	ontractual relationship:
Do you or your Immediate Family an officer, partner, director or proprietor of the entity?	If "Yes" select Party:	Self Immediate Family member or both
Do you or your Immediate Family an officer, partner, director or proprietor of the entity?	If "Immediate Family" n	ember, describe family relationship:
□ Yes       □ No         If "Yes", describe the position held:		
If "Yes", describe the position held:	Do you or your Immediate F	amily an officer, partner, director or proprietor of the entity?
If "Yes" select Party:		🗌 Yes 🗌 No
·	If "Yes", describe the p	osition held:
If "Immediate Family" member, describe family relationship:	If "Yes" select Party:	Self Immediate Family member or both
	If "Immediate Family" member. describe family relationship:	

## **Certification:**

I certify that the outside employer(s) or recipient(s) of services understand that I am engaging in such outside activity as a private citizen, not as an employee, agent, or spokesperson of the university. I further certify that the statements and disclosures provided herein are current, accurate, and complete, and understand that any false or misleading representations may result in disciplinary action and/or termination of my employment.

## **REMINDER TO THE DISCLOSER**

- If you have more than one activity for each question, you will need to complete a separate disclosure for each activity.
- Please forward this form to your immediate supervisor (as Reviewer # 1) in order to initiate its internal review process. Signature by Reviewer # 2 is also required.

THIS SECTION IS TO BE COMPLETED BY REVIEWERS ONLY	THIS	SECTION	IS TO BE	COMPLETED	BY REVIEWERS	ONLY
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Reviewer # 1:	{Discloser's	direct supervisor}
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No conflict

- Conflict identified: Monitoring Plan & Request for an Exemption/Disclosure required
- Unapproved conflict (Please provide details below)

Comment(s):

Signature:	
Print Name:	
Title:	Tel:
Dept./College/Institute/Ctr.:	Date:/20

## Reviewer # 2: {Supervisor of Discloser's direct supervisor}

•	• •	-	
	No conflict		
	Conflict identified: Monitoring Plan & Request for an Exemption/Disclosure required		
	□ Unapproved conflict (Please provide details below)		
Comment(s):			
·····			
Signature:			
Print Name: _			
Title:		Tel:	
	/Institute/Ctr.:	Date:/20	

## **ORC/COI Regulatory Review**

No conflict

- Conflict identified: Monitoring Plan & Request for an Exemption/Disclosure required
- Unapproved conflict (Please provide details below)

#### Comment(s):

Signature:	
Signature:            Print Name:	
Title:	Tel:
Dept./College/Institute/Ctr.:	Date://20

## DEFINITIONS

## Federal Conflict of Interest Criteria

A potential conflict of interest exists when a university employee 's **Significant Financial Interest** (*anything of monetary value including salary, equity interests, and/or intellectual property rights*) could directly and significantly affect **the design, conduct or reporting of the research.** (See <u>National Institutes of Health Responsibility of Applicants for Promoting Objectivity in Research 42 CFR, Part 50.602, Part 50.603, and Part 50.604, National Science Foundation Proposal & Award Policies and Procedures Guide, Part II, Chapter IV. A., Grantee Standards, and <u>U.S. Food and Drug Administration Financial Disclosure by Clinical Investigators 21 CFR, Part 54.1-3</u>, and <u>Part 54.4-6</u>). Under sponsored federal programs the potential conflict is between the investigator's personal financial interests and their ability to perform objective research. This criteria also applies to any other project participant involve in the design, conduct or reporting of the research.</u>

## Florida State Conflict of Interest Criteria

State of Florida statutes (<u>112.311</u>) requires that no employee shall have any interest, financial or otherwise, direct or indirect; engage in any business transaction or professional activity; or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties in the public interest.

Florida State Standards of Conduct (<u>FL. Statute 112.313</u>). The State of Florida outlines standards of conduct for public officers and employees. Under Florida State statute the potential conflict is between the faculty member's private financial interests and their public responsibilities to the State. Three of the standards apply to outside activity that may create a conflict of interest. To assist with your review the three standards have been summarized within the context of university employment:

(1)Doing business with the university (FL. Statute 112.313(3))--A university employee cannot purchase goods or services from any entity of which the employee (or employee's immediate family) has an equity position and/or serves as an officer, director or other managerial position. A university employee cannot sell goods and services to the university from an entity in which the employee (or employee's immediate family) has an equity position and/or serves as an officer, director or other managerial position; (2) Unauthorized Compensation (FL. Statute 112.313(4))--A university employee (or employee's immediate family) cannot accept any compensation, payment or thing of value, when the employee knows or with the exercise of reasonable care, should know, that it (compensation, payment or thing of value) was given to influence the employee's actions in his or her employment capacity; (3) Conflicting Employment or Contractual Relationship (FL. Statute 112.313(7)--A university employee cannot purchase goods or services from any entity of which the employee (or employee's immediate family) has an equity position and/or serves as an officer, director or other managerial position. A university employee cannot sell goods and services to the university from an entity in which the employee (or employee's immediate family) has an equity position and/or serves as an officer, director or other managerial position. A university employee cannot sell goods and services to the university from an entity in which the employee (or employee's immediate family) has an equity position and/or serves as an officer, director or other managerial position.

## Other relevant definitions

<u>Conflict of Interest (COI)</u>: Means a divergence between an individual's private interests and his or her employment obligations to the university such that an independent observer may reasonably question whether the individual's actions or decision are influenced or determined by considerations other than the best interest of the university.

<u>Conflict of Commitment (COC)</u>: Means an employee's devotion of time to activities that adversely affect his or her capability to meet their primary university responsibilities. Examples may include but are not limited to outside employment, pro bono or volunteer work, and government services in the public interest.

**<u>Consulting</u>**: The use of scholarly or scientific expertise for the benefit of organizations outside of the university in return for compensation.

**Covered clinical study-**Covered clinical study means any study of a drug or device in humans submitted in a marketing application or reclassification petition subject to this part that the applicant or FDA relies on to establish that the product is effective (including studies that show equivalence to an effective product) or any study in which a single investigator makes a significant contribution to the demonstration of safety. This would, in general, not include phase I tolerance studies or pharmacokinetic studies, most clinical pharmacology studies (unless they are critical to an efficacy determination), large open safety studies conducted at multiple sites, treatment protocols, and parallel track protocols. An applicant may consult with FDA as to which clinical studies constitute "covered clinical studies" for purposes of complying with financial disclosure requirements.

**<u>Entity</u>**- Means any corporation, partnership, limited partnership, proprietarship, firm, enterprise, franchise, association, self-employed individual, or trust.

**Immediate Family**: For purposes of outside activity and potential conflict of interest and commitment reporting, immediate family shall refer to the investigator's spouse and dependent children.

**Incidental use**: Refers to use of university resources (e.g., equipment, facilities, supplies) that causes no more than <u>normal depreciation of the resource and does not result in added expenses accruing to the university.</u>

**Institutional responsibilities:** Refers to an investigator's professional responsibilities on behalf of the university. The activities outlined in an employee's annual assignment or position description may include: administration, teaching, research and creative activities, course preparation, curriculum development, lectures, evaluation of student efforts, academic advising, committee meetings and memberships, service on panels such as university review boards or data and safety monitoring boards, public service to include service on advisory committees or review panels, and any other activity assigned by the employee's supervisor in accordance with university policies.

**Investigator**: Project director (PD) or Principal Investigator (PI) and any other person, regardless of title or position who is **responsible for the design, conduct, or reporting** of sponsored and non-sponsored research. The term includes key personnel, collaborators, or consultants who are responsible for the design, conduct, or reporting of sponsored and non-sponsored research.

<u>Manage</u>: Means taking action to address a financial conflict of interest, which can include reducing or eliminating the significant financial interest to ensure, to the extent possible that the design, conduct, and reporting of research will be free from bias or personal financial gain.

**Non- Publicly traded entity:** Means a privately owned company. A privately owned company is different from a publicly traded company in that its stock is not traded on public exchanges like the New York Stock Exchange, Nasdaq, American Stock Exchange, etc. Instead, shares of privately owned companies are offered, owned and traded privately among interested investors.

**<u>Outside Activity:</u>** Any compensated or uncompensated secondary employment or activity, private practice, private consulting, teaching, research, or other activity that is not part of the employee's assigned duties at the university.

**OPS** (other than Students): include the following position classifications, among others: Programmer Analyst; Engineering Technician; Laboratory Manager or Technician; Engineer; Training Specialist and Research Manager.

<u>Publicly traded entity:</u> Means a public company, publicly traded company, publicly held company is a limited company that offers its securities (stock/shares, bonds/loans, etc.) for sale to the general public, typically through a stock exchange, or through market makers operating in over the counter markets. Public companies, including public limited companies, can be either unlisted or listed on a stock exchange depending on their size and local legislation.

Remuneration: Means reward; recompense; salary; compensation.

**<u>Research and Development</u>**: Research means a systematic experiment, study, demonstration, or survey designed in develop or contribute general knowledge (basic research) or specific knowledge (applied research) in all fields by establishing, discovering, developing, elucidating, or confirming engineering, science, medicine, education, mathematics, humanities, and research involving human subjects or animals. The term includes product development include a diagnostic test or drug.

<u>Significant management position</u>: A position with a legal entity that ascribes to the incumbent the authority to make decisions that will determine whether or not the entity will or will not do business with the University of Central

<u>Unauthorized Compensation:</u> (FL. Statute 112.313(4)): A university employee (or employee's immediate family) cannot accept any compensation, payment or thing of value, when the employee knows or with the exercise of reasonable care, should know, that it (compensation, payment or thing of value) was given to influence the employee's actions in his or her employment capacity.

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