



Office of Research and Sponsored Programs Conflict of Interest Assurance and Disclosure Form

Effective Date: 09/15/2026

Purpose and Introduction

This form is used to disclose financial, professional, personal, and external relationships or activities that may affect, or appear to affect, an individual's responsibilities in connection with an active, proposed, or planned externally sponsored project or program at UL Lafayette *AND* to report changes to previous disclosures.

Each Investigator who is planning to participate in an externally sponsored project must complete this form when required by university policy or the applicable sponsor. For proposal-stage disclosures, the completed form must be submitted to the Office of Research and Sponsored Programs (ORSP) with the proposal and Internal Proposal Approval Form (IPAF). Annual and updated disclosures must be submitted to ORSP as directed.

UL Lafayette is committed to conducting its research, sponsored programs, and other institutional activities in a fair, objective, and ethical manner. Employees and other Investigators participating in externally sponsored projects are expected to disclose relationships or interests that could affect, or reasonably appear to affect, their academic, research, administrative, or professional judgment.

Disclosure of a relationship or interest does not, by itself, mean that a conflict of interest exists or that the activity is prohibited. The University will review the disclosed information and determine whether additional information, referral to another University office, or a conflict-of-interest management plan is required. ORSP will evaluate disclosed interests under the requirements applicable to the project. *When uncertain whether an interest, relationship, or activity should be disclosed, provide the available information.*

Definitions:

1. **Conflict of Interest:** A situation in which an individual's financial, professional, fiduciary, or personal interests may directly or indirectly affect, or reasonably appear to affect, the individual's judgment in carrying out a university duty or responsibility. A conflict may arise when an individual has, or appears to have, the opportunity to influence university research, academic, administrative, employment, purchasing, contracting, or other institutional decision in a manner that could result in financial, professional, or personal benefit to the individual or another person or entity with whom the individual has a relationship.
2. **Significant Financial Interest:** A financial interest of the Investigator, the Investigator's spouse, or dependent children that reasonably appears to be related to the Investigator's institutional responsibilities. Financial interests may include, but are not limited to, salary or other compensation, consulting fees, honoraria, dividends, paid authorship, ownership interests, stock or stock options, intellectual-property rights, royalties, or other payments or benefits of monetary value.

For research subject to the Public Health Service financial conflict-of-interest requirements, a Significant Financial Interest includes the following; however, other sponsors and University policies may require disclosure of interests that do not meet these thresholds. Accordingly, answer all questions in the remainder of this form.

- a. **Publicly traded entities:** Remuneration received from the entity during the preceding 12 months and the value of any equity interest in the entity as of the date of disclosure when, in the aggregate, the value exceeds \$5,000;
- b. **Non-publicly traded entities:** Remuneration received from the entity during the preceding 12 months that exceeds \$5,000, or any equity interest in the entity, regardless of value; or
- c. **Intellectual-property interests:** Intellectual-property rights or interests upon receipt of income related to those rights or interests.



Office of Research and Sponsored Programs Conflict of Interest Assurance and Disclosure Form

Effective Date: 09/15/2026

A Significant Financial Interest does not include:

- a. Salary, royalties, or other remuneration paid by UL Lafayette to the Investigator if the Investigator is employed or appointed by the University;
 - b. Income from investment vehicles, such as mutual funds and retirement accounts, when the Investigator does not directly control the investment decisions made through those vehicles; or
 - c. Income from seminars, lectures, teaching engagements, advisory committees, or review panels sponsored by a U.S. federal, state, or local government agency; a U.S. institution of higher education; an academic teaching hospital; a medical center; or a research institute affiliated with a U.S. institution of higher education.
3. **Conflict of Commitment**: A situation in which an individual's external activities, whether paid or unpaid, interfere or reasonably appear to interfere with the time, effort, or attention required to fulfill the individual's primary responsibilities to the University.
 4. **Entity**: Any external domestic or foreign business, corporation, partnership, nonprofit organization, foundation, association, institution, governmental body, sponsor, subrecipient, contractor, vendor, research collaborator, or other external organization.
 5. **Covered Family Member**: For general screening purposes under this form, an individual's spouse or domestic partner; children; parents; siblings; spouses of children or siblings; parents of the individual's spouse; or another person residing in the individual's household. This term is used to identify relationships that may warrant additional review and does not, by itself, mean that the relationship or proposed activity is prohibited. When a question specifically addresses a Significant Financial Interest under the PHS requirements, the applicable federal definition covers the Investigator, the Investigator's spouse, and dependent children. When a matter is reviewed under the Louisiana Code of Governmental Ethics, the term "immediate family" will have the meaning provided in La. R.S. 42:1102.
 6. **Investigator**: The project director, principal investigator, and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of an externally sponsored research project or program.
 7. **Institutional Responsibilities**: An individual's professional responsibilities performed on behalf of UL Lafayette, including, as applicable, research, research consultation, teaching, professional practice, administrative duties, institutional committee service, and service on panels or oversight bodies such as Institutional Review Boards or Data and Safety Monitoring Boards.
 8. **Sponsored or Reimbursed Travel**: Travel related to an Investigator's institutional responsibilities that is reimbursed directly to the Investigator or paid on the Investigator's behalf by an external entity. For research subject to PHS requirements, disclosure is not required when the travel is reimbursed or sponsored by a U.S. federal, state, or local government agency; a U.S. institution of higher education; an academic teaching hospital; a medical center; or a research institute affiliated with a U.S. institution of higher education. Travel *sponsored or* reimbursed by a foreign government, foreign institution, or other foreign entity is not covered by these exclusions.

Instructions

- If you answer "**No**" to all questions, proceed to the Employee Acknowledgment.
- If you answer "**Yes**" to financial interest, external position, entity relationship, outside activity, or intellectual-property interest: Complete one Organization Profile for each applicable external entity.
- If you answer "**Yes**" to sponsored or reimbursed travel: Complete one Travel Entry for each applicable trip.
- If you answer "**Yes**" to family or personal relationship: Provide the Family/Personal Relationship information as requested. Complete an Organization Profile only if an external entity is also involved.



Office of Research and Sponsored Programs Conflict of Interest Assurance and Disclosure Form

Effective Date: 09/15/2026

Project Information

Disclosing Investigator Information			
Name			
Position/Title			
Department/Unit			
Email Address			
Role on Project	☐ PI/PD ☐ Co-PI/Co-Investigator ☐ Senior/Key Personnel ☐ Other:		
Project Information			
ORSP Proposal or Award Number			
Proposal/Project Title			
Period of Performance		Proposal Status	☐ Pending ☐ Awarded/Active
Sponsor Information			
UL Lafayette's Role:	☐ Direct Recipient ☐ Subrecipient:		
Prime Sponsor	☐ NSF ☐ NIH/PHS ☐ Other HHS ☐ DOE ☐ DOL ☐ Dept. Education ☐ State or Local Government ☐ Nonprofit ☐ Industry ☐ Other (please specify: _____)		
Disclosure Type	☐ New Disclosure ☐ Annual Disclosure ☐ Update to Current Disclosure		

Financial Interests, Compensation and Investments

Instructions: For Questions 1–3, include interests held by you, your spouse, or your dependent children. For Question 4, apply the broader *Covered Family Member* definition. Do not include interests specifically excluded under the Significant Financial Interest definition. When uncertain whether an interest should be disclosed, answer “Yes” and provide the available information.

☐ Yes ☐ No	During the preceding 12 months, have you, your spouse, or your dependent children received remuneration from a publicly traded entity and/or held stock, stock options, or another equity interest in that entity where the combined value exceeded \$5,000 and the entity reasonably appears related to your institutional responsibilities?
☐ Yes ☐ No	During the preceding 12 months, have you, your spouse, or your dependent children received remuneration exceeding \$5,000 from a non-publicly traded entity, or held any stock, stock option, ownership interest, or other equity interest in that entity, regardless of value, where the entity reasonably appears related to your institutional responsibilities?
☐ Yes ☐ No	Have you, your spouse, or your dependent children received income related to any patent, copyright, license, royalty, or other intellectual-property right or interest that reasonably appears related to your institutional responsibilities, excluding salary, royalties, or other remuneration paid by UL Lafayette to you as a University employee or appointee?
☐ Yes ☐ No	Regardless of whether a federal monetary threshold is met, do you or a Covered Family Member hold a financial or ownership interest in, or receive or expect to receive compensation from, an entity that: • sponsors or supports the proposed, pending, or funded project; • is a proposed or current subrecipient, contractor, vendor, or research collaborator on the project; or • bids for, is negotiating, or has a contract with UL Lafayette that is related to your institutional responsibilities or the sponsored project?

Office of Research and Sponsored Programs
Conflict of Interest
Assurance and Disclosure Form

Effective Date: 09/15/2026

External Positions and Entity Relationships

☐ Yes ☐ No	Do you or a Covered Family Member currently hold, or anticipate holding, any compensated or uncompensated position as a board member, director, officer, trustee, partner, manager, employee, consultant, adviser, or other fiduciary or decision-making representative of an external entity that reasonably appears related to your institutional responsibilities or the proposed, pending, or funded project?
☐ Yes ☐ No	If Yes, is the external entity a sponsor, proposed or current subrecipient, contractor, vendor, research collaborator, or other organization associated with the proposed, pending, or funded project?
☐ Yes ☐ No	If Yes, are you able to participate in or influence any University decision involving the entity, including its selection, recommendation, approval, scope of work, budget, negotiation, contracting, supervision, evaluation, payment, or performance oversight?

Outside Activities and Conflict of Commitment

☐ Yes ☐ No	Are you currently engaged in, or do you plan to engage in, any paid or unpaid outside employment, consulting, professional, entrepreneurial, or other external activity that relates to your institutional responsibilities or the proposed, pending, or funded project?
☐ Yes ☐ No	If Yes, could the disclosed external activity affect, or reasonably appear to affect, your University judgment, responsibilities, or decisions?
☐ Yes ☐ No	If Yes, does the disclosed external activity interfere, or reasonably appear to interfere, with the time, effort, or attention required to fulfill your University responsibilities or sponsored-project commitments?
☐ Yes ☐ No ☐ N/A	If prior University approval is required for the disclosed external activity, have you obtained or requested that approval?

Research-Related Effects and Restrictions

☐ Yes ☐ No ☐ N/A	If you disclosed a financial, ownership, intellectual-property, or other economic interest above: Could the value of that interest increase or decrease based on the design, conduct, reporting, results, or commercialization of the proposed or funded project?
☐ Yes ☐ No ☐ N/A	If you disclosed a financial, professional, fiduciary, family, or personal relationship above: Could that relationship affect, or reasonably appear to affect, your objectivity in the design, conduct, reporting, oversight, or administration of the project?
☐ Yes ☐ No	Do you have any agreement, obligation, or commitment to an external entity that could restrict or delay publication, data sharing, access to research results, or other academic activities beyond terms reviewed and approved by UL Lafayette?

Family and Personal Relationships in Employment or Project Decisions

Disclosure of a family or personal relationship does not, by itself, mean that the proposed employment or project activity is prohibited. The University will review the circumstances to determine whether referral, recusal, independent oversight, or reassignment of responsibilities is appropriate.

☐ Yes ☐ No	Does the proposed, pending, or funded project involve the employment, appointment, compensation, or project participation of a Covered Family Member or another individual with whom you have a close personal or romantic relationship?
---	--



Office of Research and Sponsored Programs
**Conflict of Interest
Assurance and Disclosure Form**

Effective Date: 09/15/2026

☐ Yes ☐ No	If Yes, are you able to participate in or influence any decision involving that individual's recruitment, selection, appointment, compensation, duties, supervision, evaluation, payroll, effort certification, promotion, leave, discipline, or termination?
☐ Yes ☐ No	If Yes, will the individual report directly or indirectly to you, or will you approve or certify the individual's project work, compensation, payroll, or effort?
☐ Yes ☐ No	If Yes, have you disclosed the relationship to the appropriate department head, dean, Human Resources representative, or other University official?

Sponsored or Reimbursed Travel

☐ Yes ☐ No	Since your most recent disclosure—or during the preceding 12 months if this is your initial disclosure—have you participated in any Sponsored or Reimbursed Travel, as defined in this form, that was related to your institutional responsibilities?
☐ Yes ☐ No	Do you currently anticipate participating in any Sponsored or Reimbursed Travel related to your institutional responsibilities during the next 12 months?

If you answered "Yes" to either question, complete one Travel Entry for each applicable trip. Include the sponsor or organizer, purpose, destination, dates or duration, and estimated monetary value, if known.

Disclosing Investigator Acknowledgement

By signing below:

- I certify that the information provided in this disclosure and any attachments is complete and accurate to the best of my knowledge.
- I understand my responsibility to disclose financial, professional, fiduciary, personal, and external interests or activities as required by University policy and the requirements applicable to the sponsored project.
- I understand that disclosure of an interest, activity, or relationship does not, by itself, mean that a conflict exists or that the activity is prohibited.
- I have read and understand the University's **Policy and Procedures on Financial Conflicts of Interest Related to Externally Sponsored Projects**.
- I agree to update this disclosure at least annually and whenever required by university policy or the applicable sponsor. For research subject to PHS requirements, I understand that a newly discovered or acquired Significant Financial Interest must be disclosed within 30 days.
- I agree to provide additional information requested by the University and to cooperate in the review and development of any management plan or other appropriate safeguards.
- I agree to comply with any conditions imposed by the University to manage, reduce, or eliminate an identified conflict, including, as applicable, recusal, reassignment of responsibilities, independent oversight, or modification of project duties.
- I understand that the University may disclose or report information to a sponsor, pass-through entity, governmental body, or other appropriate party when required by law, regulation, policy, or award terms.

Print Name

Disclosing Investigator Signature

Date

Vice President for Research and Innovation Signature

Date



Office of Research and Sponsored Programs Conflict of Interest Assurance and Disclosure Form

Effective Date: 09/15/2026

Supplemental Disclosure Instructions

If you answered **"Yes"** to a question involving a financial interest, external position, external entity, outside activity, or intellectual-property interest, complete one **Organization Profile** for each applicable external entity.

If you answered **"Yes"** to a family or personal relationship question, complete one **Organization Profile** for each applicable external entity and provide the individual's name, relationship to you, proposed or current project role, reporting relationship, and a description of any employment, supervisory, financial, or project decisions you may influence. Attach an additional page if necessary.

If you answered **"Yes"** to either question under Sponsored or Reimbursed Travel, complete one **Organization Profile** for each applicable external entity and complete one Travel Entry for each trip.



Office of Research and Sponsored Programs Conflict of Interest Assurance and Disclosure Form

Effective Date: 09/15/2026

Organization Profile

No. ____ of ____

Complete one Organization Profile for each external entity identified in the disclosure. Make additional copies as necessary.

Organization Name		
Organization Address (including country)		
Type of Entity	☐ Publicly Traded ☐ Non-Publicly Traded/Private Held ☐ Nonprofit ☐ Governmental ☐ Institution of Higher Education ☐ Other: _____ ☐ Unknown	
Relationship to Project (select all that apply)	☐ Sponsor ☐ Prime Sponsor ☐ Pass-Through Entity ☐ Proposed or Current Subrecipient ☐ Contractor ☐ Vendor ☐ Research Collaborator ☐ Other: _____ ☐ Not directly associated with this project but related to my institutional responsibilities.	
Type of External Relationship (select all that apply)	☐ Employee ☐ Consultant ☐ Governing Board or Officer ☐ Director or Trustee ☐ Partner or Manager ☐ Advisory Board or Committee ☐ Speaker or Lecturer ☐ Equity or Ownership Interest ☐ Stocks or Stock Options ☐ Royalty Income ☐ Intellectual Property Rights ☐ Other: _____	
Is the position or relationship compensated?	☐ Yes ☐ No	
Relationship Start Date:		
Anticipated End Date, if applicable:		
The disclosed relationship involves: (check all that apply)	☐ Self ☐ Spouse ☐ Dependent Child ☐ Other Covered Family Member(s): _____ If the relationship involves another Covered Family Member, briefly describe any compensation, ownership, or other financial interest held by that individual:	
☐ Yes ☐ No	During the preceding 12 months, have you, your spouse, or your dependent children received salary, consulting fees, honoraria, director's fees, paid authorship, royalties, or other remuneration from this organization?	
If Yes, approximate amount or range:	☐ \$5,000 or less ☐ More than \$5,000 ☐ Amount Unknown ☐ Other Information: _____	
☐ Yes ☐ No ☐ Not Applicable	Do you, your spouse, or your dependent children currently hold stock, stock options, or another equity interest in this publicly traded organization?	
Estimated current value:	☐ \$5,000 or less ☐ More than \$5,000 ☐ Value Unknown	
☐ Yes ☐ No ☐ Not Applicable	Do you, your spouse, or your dependent children hold any stock, stock option, ownership interest, or other equity interest in this non-publicly traded organization, regardless of value?	
Type and approximate ownership percentage, if known:		



Office of Research and Sponsored Programs
Conflict of Interest
Assurance and Disclosure Form

Effective Date: 09/15/2026

☐ Yes ☐ No	Have you, your spouse, or your dependent children received income from this organization related to a patent, copyright, license, royalty, or other intellectual-property right or interest?
If yes, briefly describe:	
☐ Yes ☐ No	Are you able to participate in or influence any University decision involving this organization, including its selection, recommendation, approval, scope of work, budget, negotiation, contracting, payment, performance evaluation, or project oversight?
☐ Yes ☐ No	Did you participate in selecting this organization or developing its proposed scope of work or budget for the project?
☐ Yes ☐ No	Could the value of your financial or ownership interest, or compensation received from the organization, be affected by the project's design, conduct, reporting, results, or commercialization?
Briefly describe the relationship and any University decisions or project responsibilities you may influence:	

Travel Entry No. ____ of ____

Traveler: Disclosing Investigator	
Sponsor or Organizer	
Travel Status	☐ Planned in next 12 months ☐ Occurred in last 12 months
Travel Purpose	
Destination	
Travel Dates	
Estimated Monetary Value, if known	

Institutional Determination

(ORSP use only)

- ☐ No additional review required
 ☐ Additional information required
☐ The disclosed interest is not related to the sponsored project
☐ The interest is related but does not constitute an FCOI
☐ A FCOI has been identified; a management plan is required
☐ Referral required: ☐ Human Resources
 ☐ Ethics/Legal
 ☐ ORI
 ☐ Other: _____

Reviewing Pre-Award Initials: _____

Date: _____