## **ADDENDUM**

## STATEMENT OF FINANCIAL INTERESTS

This form is to be completed by any Investigator, who may have an actual, potential, or perceived conflict of interest in connection with a sponsored project, when additional information is required to supplement data provided on a *Conflict of Interest (COI) Form*. The term "conflict of interest" refers to situations in which financial or other personal considerations may compromise or may have the appearance of directly and significantly compromising a person's professional judgment in proposing, conducting or reporting research or other sponsored activities.

It is the Investigator's responsibility to obtain and provide the requested information to ensure that this disclosure form is completed fully and accurately. A separate disclosure must be completed for each outside entity in which the Investigator has an actual, potential, or perceived conflict of interest.

**Please note**: During the term of the research project, if any new or previously undisclosed conflicts arise, a separate Addendum must be completed and submitted to the Associate Vice President for Research and Sponsored Projects.

[If additional space is needed to respond to an item, please attach an additional page.]					
Na	Name of Individual Submitting Statement:				
Ro	Role of Individual Submitting Form:   PI Co-PI Other:				
Sp	onsor/Funding Agency:				
Pr	oject Title:	•			
00	GC Project#: ASC Account# (if applicable):	<del>_</del>			
1.	Brief Description of the Project:	_			
		_			
_		<del>-</del>			
_		_			
		<u> </u>			
		_			
2.	a. Name of the Outside Entity:	_			
	b. What is the principal business of the Outside Entity?	_			
	c. Address:				

3. A	Are CSUF students or employees performing services for the Outside Entity?				
	Yes, describe tasks performed by the students:				
4. Is o	or will the Outside Entity be involved with the sponsored project as a subcontractor, consortium member,				
sup	plier of goods, lessor, or other participant?				
	□ No				
	Yes, describe relationship between the Outside Entity and the project:				
	scribe the relationship, including any financial relationship, between you, your spouse or child <u>and</u> the side Entity. If not applicable, state "N/A":				
_					
	es or will the Outside Entity manufacture or commercialize any device, procedure, drug, vaccine or other duct that is associated with or that will predictably result from the project?  No				
	Yes. Describe/provide information on the device, procedure, etc. :				
	e you, your spouse or child a founder, director, officer, partner, trustee, board member of, or a holder of				
any	supervisory, managerial, financial, technical, scientific or advisory positions in the Outside Entity?				
	<ul><li>No</li><li>☐ Yes. Specify the position(s), general responsibilities and expected time commitment (hours/year):</li></ul>				
8. D	o you, your spouse, or child have a consultant relationship with the Outside Entity?  No Yes  If YES: a) Describe the consultant duties and expected time commitment (hrs/yr):				
	b) Does the remuneration (e.g., compensation, equity, etc.) from the Outside Entity exceed \$10,000 annually when aggregated for you, your spouse and/or child? \( \subseteq \text{No} \subseteq \text{Yes} \)				

9. Did you, your spouse and/or child receive any income (including any payment, such as salary or consulting any payment and sal					
fees, royalty payments [paid directly by the Outside Entity], reimbursement of expenses (including travel					
or other reimbursements of \$10,000 or more received within the last 12 months from the Outside Entity?					
☐ No ☐ Yes, amount: \$					
10. Do you, your spouse or child anticipate receiving income of \$10,000 or more during the next 12 months					
☐ No ☐ Yes, amount: \$					
If the answer is YES to either Question 9 or 10, describe the Income type and explain why it is (to be)					
provided by the Outside Entity:					
11. Do you, your spouse or child have:					
An investment of \$10,000 or more or a 5% or more ownership interest in thee sponsor or entity listed above?					
☐ No ☐ Yes, please specify type, check all that apply: ☐ Stock ☐ Stock Options					
☐ Bonds ☐ Other:					
a. If stock or stock options, number of shares: and/or estimated current value: \$					
b. If bonds, estimated current value: \$					
c. Estimated percentage of total value of the company your interest represents:%					
12. Does the Outside Entity hold any intellectual property rights, such as rights to a pending patent					
application, issued patent, or related to an invention on which you, your spouse, or child are listed as					
inventors?					
□ No					
Yes, but the license is from the University					
Yes, and the application, patent, or license is not from the University. Indicate where the					
application, patent or license is from:					
13. Please describe how you propose to maintain objectivity in designing, conducting, or reporting of the					
research activity as a result of your relationship with the Outside Entity. For example:					
What mechanisms are in place to prevent the introduction of bias into research projects? Will the project be supervised by someone with authority and no conflicting interests? What means will be used to verify research results?					
Will data and materials be shared openly with independent researchers? If not, who determines accessibility to such resources?					

14. Please describe the process for independent review	of the research.
For example:	
Will the research work plan receive independed Will the product of the collaborative effort be partial Will the Outside Entity, sponsor or other relevant presentations or publications related to the result Will the Outside Entity have input into the publications.	oublished in peer-reviewed scientific literature? ant interests receive acknowledgment in public earch results?
15. Please provide any additional information that will and Sponsored Projects and the Conflict of Interest	be helpful to the Associate Vice President for Research
<b>VERIFICATION</b> : I have used all reasonable diligence knowledge it is true and complete.	e in preparing this Statement and that to the best of my
Signature of Investigator	Date

## ~FOR CONFLICT OF INTEREST COMMITTEE USE ONLY~ CONFLICT OF INTEREST DISCLOSURE REVIEW COMMITTEE RECOMMENDATIONS

The disclosed financial interest(s) does	The disclosed financial interest(s) does not appear to have any impact on the project. No further action				
is required from investigator.					
The disclosed financial interest(s) may	reasonably have an impact on	the project. The attached			
The disclosed financial interest(s) may reasonably have an impact on the project. The att Conflict of Interest Resolution Plan suggests action(s) recommended in order to manage					
	the actual, potential, or perceived conflict of interest.				
(Attach COI Resolution Plan)	net of interest.				
(Attach COI Resolution I tan)					
The disclosed financial interest(s) crea	The disclosed financial interest(s) create a conflict that cannot be appropriately managed or eliminated. The attached memo suggests recommended action(s).				
eliminated. The attached memo sugges					
(Attach Memo)					
Print Name	Signature	Date			
Chair, Conflict of Interest Committee					
I concur with COI Committee Rec	ommendations				
I concur with COI Committee Rec	ommendations, with additional	l action(s)*			
I do not concur with COI Committ	tee Recommendations. Please s	see notes below.*			
Print Name	Signature	Date			
AVP, Office of Research and Sponsored Pro		Dute			
(Reviewing Official)					
*Notes/Additional Action(s):					
*Notes/Additional Action(s):					