Financial Conflict of Interest Disclosure Form
Lake Forest College

As an individual designated as an "Investigator" or "Senior/key Personnel" under the College's Financial Conflict of Interest policy by virtue of my role in applying for or directing a federal grant, I do hereby make the following certifications:

1. I have received, read, and understood Lake Forest College's Financial Conflict of Interest policy.
2. I have completed the NIH FCOI Online Tutorial and have submitted my Certificate of Completion to the Office of Sponsored Research.
3. I have read and signed the Financial Conflict of Interest Disclosure Form and have submitted it to the Director of Grants and Sponsored Research.

I also certify that the following information is true and complete to the best of my knowledge.

1. Title of grant proposal: _____
   _____
2. Funding agency: _____
3. Impending grant application's Date of Submission: _____
   (Note: FCOI Disclosure form must be signed and returned to the Director of Grants and Sponsored Research prior to grant application submission)
4. Duration of the grant: Start Date: _____ End Date: _____
5. Do you or does a family member have a financial interest exceeding $5,000 U.S. in any company or organization that might be affected by the research or other activities proposed in this grant application? YES ____ NO ____

   If you checked YES or are aware of any other significant financial interests related to your institutional responsibilities, please explain in the space provided below. Attach an extra sheet if necessary.

_____

_____

_____

_____

Name: _____
Signature: _____
Date: _____

Please return this form to the Director of Grants and Sponsored Research. In cases where there exist potential conflicts of interest associated with a grant application, the Director of Grants and Sponsored Research will forward this disclosure form to the appropriate College office. In cases where the College is unable to manage a conflict of interest, the College will inform the appropriate sponsoring agency.