

UVI Conflict of Interest Disclosure (COI) Determination Form

| First Name: | Last Name: |
|-------------|---------------|
| | Position |
| Department: | _Title: |

Please use this Form to determine if you need to complete and submit Appendix A: Annual Financial Interest Disclosure Form and/or Appendix C: Outside Employment, Consulting, or Contracting Disclosure Form.

Instructions

If your responses to Questions 1 and 2, below, are No, please sign this Disclosure Determination Form and return it to your supervisor/manager.

If your response to Question 1 and/or Question 2 is Yes, please complete the appropriate Form(s) and attach the Form(s) to this Disclosure Determination Form and submit this information to your supervisor/manager.

Questions

If you have any questions regarding the COI Disclosure Determination Form, Appendix A: Annual Financial Interest Disclosure Form, or Appendix C: Outside Employment, Consulting, or Contracting Disclosure Form, please contact the Human Resources Office at **693-1410**.

1. Are you responsible for the design, conduct, or reporting involving federally-sponsored research, or are you authorized to enter into financial transactions on behalf of the University and in a position to influence these transactions?

_____ No

- _____Yes If you responded Yes to Question 1, you must complete and attach Appendix A: Annual Financial Interest Disclosure Form.
- Are you currently or do you intend to engage in non-UVI employment, consulting, or contracting?
 _____ No
 - ____Yes

If you responded yes to Question 2, you must complete and attach Appendix C: Outside Employment, Consulting, or Contracting Disclosure Form.

I acknowledge that I have read and understand the University's Conflict of Interest Policy and I certify that I either have no conflicts of interest to disclose or that I have completed and attached the appropriate Form(s) for a Conflict of Interest determination to be made by my supervisor/manager and Human Resources.

Signature: _____

Date:_____