

CALIFORNIA STATE UNIVERSITY, EAST BAY
OFFICE OF RESEARCH AND SPONSORED PROGRAMS (ORSP)
PHS FINANCIAL DISCLOSURE FORM

(Required for all proposals submitted to the National Institutes of Health and any other entities that have adopted their requirements)

THIS SUBMITTAL is for a New Disclosure Updated Disclosure

Investigator's Name: _____

Academic Department: _____

Proposal/Project Title: _____

Award Number: _____

Proposal Type (please check one):

National Institutes of Health (NIH)/Public Health and Services (PHS)

Subaward from _____ under NIH/PHS Prime

Other: _____

In accordance with the CSUEB Policy on Disclosure of Financial Interests and Management of Conflicts of Interest Related to Public Health Services Sponsored Awards for Research (42 C.F. Part 50, Subpart F and 45 C.F.R., Part 94), the Principal Investigator and all other Co Investigators must disclose their personal significant financial interests (and those of their spouse/registered domestic partner and/or dependent children) related to their institutional responsibilities. This includes the Principal Investigator, Co Investigators, Senior and Key Personnel, and any other individual who is reb.75Tle31Tf1.742504.847Tc0003Tj/TT41Tf.23950TD1587eea(e)2nm41Tf1(For)7.9(m)JT3

or any other payments or consideration with value during the prior twelve months. Equity interest includes any stock, stock option, or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value;

2. With

