

WINONA STATE UNIVERSITY

DISCLOSURE STATEMENT REGARDING
CONFLICTS OF FINANCIAL INTERESTS

Applicant _____ Title _____

Department _____

Co-Applicants _____

Project Title _____

Dates: (start) : _____ (end) : _____

Funder _____

1. Are you or your spouses or dependents (dependent children or other relatives living at the same address as the applicant or co-applicants) an officer, director, partner, trustee, employee, advisory board member, or agent of the external organization funding this sponsored project or of any organization from which goods and services will be obtained under the sponsored project?

yes (if so, describe in detail the nature and extent of the affiliation on an attached sheet).
 no

2. Are you or your spouse or dependents the actual or beneficial owner of more than five percent (5%) of the voting stock or controlling interest of the external organization funding this sponsored project or any external organization from which goods and services will be obtained under this sponsored project?

yes (if so, describe in detail the nature and extent of the affiliation on an attached sheet).
 no

3. Have you or your spouse or dependents derived income within the past year or do you or any member of your immediate family anticipate deriving income exceeding \$5,000 per year from the external organization funding this sponsored project or any external organization from which goods and services will be obtained under this sponsored project?

yes (if so, describe in detail the nature and extent of the affiliation on an attached sheet).
 no

Certification: I have read and understand the Winona State University Conflicts of Interests Policy Pertaining to Grants and Sponsored Research Projects; have made all financial disclosures required; and will comply with any conditions or restrictions imposed to manage, reduce or eliminate actual or potential conflicts or interests.

Signature: _____ Date: _____