

Western Washington University
Faculty and Investigator Disclosure Statement
Regarding Federally sponsored Projects

Report only those outside interests related to your federally funded University activities. Interests and activities related to your federally funded projects are not necessarily impermissible. This disclosure is intended to meet the Federal and University requirements and to protect faculty and Investigators from speculation or perception of compromising academic and/or institutional integrity. This form must be completed annually by all faculty and investigators and be submitted to the department chairperson, dean or immediate supervisor by January 15th of each succeeding year.

Name: _____ **Title/Rank:** _____

Department: _____

Division: _____

Name of Funding Sponsor: _____

Project Period: _____

Date of Completion: _____

1. Are you or any member of your immediate family (spouse, children, or other dependent relatives living at the same address as the faculty member or investigator) an officer, director, partner, trustee, employee, advisory board member, or agent of the external organization involved in 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. Do you or any immediate family member have an interest that, when aggregated for you, your spouse and dependent children, have an interest exceeding \$10,000 in value as determined through reference to public prices or other reasonable measures of fair market value, **AND** represents more than 5% ownership interest in any single entity?

_____ yes (if so, describe in detail the nature and extent of the equity interest on an attached sheet).

_____ no

3. Have you or any member of your immediate family derived income within the past year or do you or any member of your immediate family anticipate deriving income exceeding \$10,000 per year from the external organization involved in this sponsored project or any external organization from which goods and services will be obtained under this sponsored project?

_____ yes (if so, describe on an attached page the amount of the income and the reason for which it was or will be derived).

_____ no.

4. Do you have any affiliation with an external organization that would diminish your ability to fulfill your paramount obligations to your students, your colleagues, or the University; or have you involved any graduate student in a proprietary capacity with the external organization?

_____ yes (if so, describe on an attached page the nature of the affiliation and the amount of time per week you dedicate to it).

_____ no

5. Are you or a member of your immediate family involved in any situation which you believe may create an actual or perceived conflict of interest?

_____ yes(if so, describe on an attached sheet in detail the situation in which you believe there is a conflict of Interest).

_____ no.

Certification:

I have read and concur with the Western Washington University Financial Disclosure Policy Pertaining to Federally Sponsored Projects. The above questions are answered in a complete and accurate manner and are a reflection of my current reportable interests and activities.

Signature: _____ **Date:** _____

Statement of Department Chair, Dean, Director:

I certify that reports to me, and that I am (___ not aware) (___ aware) of any existing conflict of interest either real or perceived or which has not already been reported and resolved.

Signature of Dean/Department Chair: _____ **Date:** _____

Typed Name: _____

Title: _____

Statement of University Designated Reviewer Responsible for Financial Disclosure Policy:

I have reviewed this form and find (___ no further) (___ further) action is required.

Signature: _____ **Date:** _____

Typed Name: _____

Title: _____