

CUNY Significant Financial Interest Supplement Form for PHS Funded Research

Name of Investigator:

College:

Title of Research Project:

Funding Agency:

Please provide requested details regarding your positive responses made on the CUNY Significant Financial Interest Disclosure Form and, if necessary, use additional Supplement Forms:

1. Salary and any payment for other services (for example, consulting fees, honoraria, paid authorship) received from a **publicly traded entity** in the past 12 months:

Name of person or persons (and relationship to self) to whom the salary or payment was made:

Name of **publicly traded entity**:

Nature of salary or payment for services:

Amount of salary or payment received:

Relationship to your institutional responsibilities:

2. Equity interest (including any stock, stock option, or other ownership interest) in a **publicly traded entity**:

Name of person or persons (and relationship to self) who hold(s) the equity interest:

Name of **publicly traded entity**:

Type of equity interest:

Current value of equity interest:

Relationship to your institutional responsibilities:

3. Salary and any payment for other services (for example, consulting fees, honoraria, paid authorship) received from a **non-publicly traded entity** in the past 12 months:

Name of person or persons (and relationship to self) to whom the salary or payment was made:

Name of **non-publicly traded entity**:

Nature of salary or payment for services:

Amount of salary or payment received:

Relationship to your institutional responsibilities:

4. Equity interest (including any stock, stock option, or other ownership interest) in a **non-publicly traded entity**:

Name of person or persons (and relationship to self) who hold(s) the equity interest:

Name of **non-publicly traded entity**:

Type of equity interest:

Relationship to your institutional responsibilities:

5. Intellectual property rights and interests (for example, patents and copyrights):

Owner(s) of the intellectual property:

Description of the intellectual property:

Description of any royalties or income you currently receive or may receive in the future:

Relationship to your institutional responsibilities:

6. Acquisition or intention to acquire ownership of, or a license to, CUNY-owned intellectual property by an entity in which you have a financial interest described in items 1, 2, 3 or 4 above:

Name of entity:

Description of CUNY-owned intellectual property and your role in developing, discovering, or creating it:

Description of the interest that the entity has acquired or is intending to acquire:

7. Teaching, supervision, or otherwise having control over any student or postdoctoral associate at CUNY who might be involved in work for an entity in which you have a financial interest described in items 1, 2, 3 or 4 above:

Name of entity:

Name of the student(s) or post doctoral associate(s):

Planned involvement of the student(s) or post-doctoral associate(s):

8. Any reimbursed or sponsored travel (*i.e.*, travel paid on your behalf and not reimbursed to you) that is related to your institutional responsibilities.

Travel sponsor/organizer:

Purpose of the trip:

Destination:

Duration:

Amount of expenses, if known:

Agreement & Signature:

By signing this form, I certify to the following:

- All of the information contained herein is true, accurate and complete.
- I will submit an updated Form annually, prior to submission of annual progress reports; and also within 30 days of any material change to the above-disclosed Significant Financial Interest(s) or discovering or acquiring a new Significant Financial Interest.
- I will comply with all applicable regulations, CUNY policies, sponsor requirements and any conflict of interest management and oversight plans issued by CUNY.

Signature

Date