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Financial Conflicts of Interest Certification

UNIVERSITY OF SOUTH ALABAMA

Principal Investigator & Project

PI: _____ AGENCY: _____

Project Title: _____

Disclosure Requirements for Public Health Service (PHS) Agencies

The proposed project or relationship with the Sponsor requires disclosure of financial conflicts of interests* related to institutional responsibilities. Provide the following information for each person who is identified as senior/key personnel** and others who may be identified as responsible for the design, conduct or reporting of the research. All individuals listed below must have on file an [Annual Conflict of Interest Disclosure form](#) at the time of grant application.

The University's designated official(s) [department chair/supervisor] is TBD

is awarded, these individuals must be named at the time of award or subsequently on below and submitting it to the Office of Sponsored Projects Administration at:

dmusgrove@southalabama.edu

NAME	ROLE
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