# Investigator Conflict of Interest Form

## SECTION 1.0: General Information

1. **PI/QI Name:**
2. **Sponsor:**
3. **Protocol Number:**

## SECTION 2.0: Conflict of Interest Information

### Financial Interest #1:

1. **Investigator Name:**
2. Please provide a detailed disclosure of the financial interests that are related to this research. Your explanation must specify the nature and the monetary amount of the financial interest. 
3. Please explain the impact, if any, your financial interest may have on your conduct of this research study.
4. Please describe your plan for managing the potential conflict of your financial and research interests in order to help ensure that the protection and rights of research subjects are maintained.

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I certify that the responses to the questions above are accurate and complete and that my responses constitute a full disclosure of any conflicting interests and activities that have the potential to affect the rights of human subjects involved in research, if any. I certify that I will disclose to Schulman any conflicts of interest that arise during the course of the study.

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Investigator Signature Required ____________________  Signature Date (mm/ dd/ yyyy)

### Financial Interest #2:

5. **Investigator Name:**
6. Please provide a detailed disclosure of the financial interests that are related to this research. Your explanation must specify the nature and the monetary amount of the financial interest.
7. Please explain the impact, if any, your financial interest may have on your conduct of this research study.
8. Please describe your plan for managing the potential conflict of your financial and research interests in order to help ensure that the protection and rights of research subjects are maintained.

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Investigator Signature Required ____________________  Signature Date (mm/ dd/ yyyy)