

## Investigator Financial Conflict of Interest (fCOI) Certification Form

<b>Project Information</b>	
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ePAWS/ IP#

Funding Agency Award #

Project Title

Funding Agency

Prime Funding Agency

No Prime

**Instructions:** Please confirm that all Investigators (individuals responsible for the design, conduct or reporting of the research) participating in this research project are correctly identified on this form.

<b>NU Personnel</b>	<i>Name</i>	<i>Role</i>	<i>Disclosure is Current</i>	<i>Citi Training (PHS Only)</i>
		Principal Investigator		

*The following section is completed only for awards funded by PHS, other funding agencies following PHS fCOI rules and NSF awards.*

<b>Subrecipients</b>	<i>Institution</i>	<i>Subrecipient Contact Investigator</i>	<i>PHS Compliant Policy</i>

  

<b>Consultants</b>	<i>Name</i>	<i>Meets the definition of Investigator</i>	<i>If Yes, provide email</i>

**Notes:**

**I confirm that the above named individuals are “Investigators”, responsible for the design conduct or reporting of this project’s research.**

Review completed.

Principal Investigator Signature

ORAF Signature

For details, visit: <http://www.northeastern.edu/research/raf/compliance/research-and-regulatory-compliance/fcoi/>