

University of Maine
Office of Research Compliance

***Investigator Financial Conflict of Interest Certification for subrecipients
electing to follow UMaine's FCOI Policy***

Investigator Name: _____

Project Title: _____

As an Investigator¹ having responsibility for designing, conducting and/or reporting on the above-mentioned project, I agree to perform the work in accordance with University policies and Sponsor requirements; and I agree to follow commonly accepted professional practices in conducting, recording, and interpreting the work.

I further certify that:

I have successfully completed the required Conflict of Interest training and reviewed UMaine's "[Policies and Procedures for Financial Disclosures and Conflicts of Interest in Extramurally Sponsored Activities \(PDF\)](#)"; and

- ☐ **DO NOT** have a significant financial interest in the proposed project.
- ☐ **DO** have a significant financial interest in the proposed project **AND** will prepare and submit a [Significant Financial Interest Disclosure Form \(PDF\)](#) to the Office of Research Compliance.

Date

Investigator Signature

¹ **Investigator** refers to the Project Director/Principal Investigator, any other person identified as Senior/Key personnel in a grant application, progress report, or other report submitted to an external sponsor, and others who direct or can materially influence the research, or who are responsible for the design, conduct, and reporting of such research