

**Report Form for Financial Disclosure
Virginia Western Community College**

Personnel associated with projects funded by the National Science Foundation or the Public Health Service (U.S. Department of Health and Human Services) are referred to Virginia Western's Policy for "Financial Disclosure to Avoid Conflict of Interest in Federally Funded Programs." Investigators (including Investigator's spouse and dependent children) must provide the information requested below. Please complete, sign second page, and return this form to the Director of Grants Development.

Name	Name
Title	Title
Department	Department
Project Title	Project Title
Funding Agency	National Science Foundation
Role in the Project	Principal Investigator
Project Dates (start-end)	Start date-Stop date (Estimated)

I have read the "Policy for Financial Disclosure to Avoid Conflict of Interest in Federally Funded Programs" and (check one):

- _____ **A. Do not have any Significant Financial Interests** to report for myself, my spouse, or my dependent children which would reasonably appear to be affected by the project.
- _____ **B. Do have Significant Financial Interest** to report for myself, my spouse, or my dependent children which would reasonably appear to be affected by the project.

If you checked A, simply sign the form and return.

If you checked B, check all that apply, attach requested documentation, sign the form, and return.

- _____ 1) Salary or other payments for services (e.g., consulting fees or honoraria) anticipated over the next 12 months when aggregated for the Investigator and the Investigator's spouse and dependent children exceed \$5,000.

Attach information including:

- a) A description of the services to be performed.
- b) Name of the organization for which services will be performed.
- c) Date of service.
- d) Amount of payment expected.