



SAMPLE Certification of Compliance Checklist (Due XX/XX/XX)

Reporter Name: REPORTER FULL NAME

Entity Name: ENTITY NAME

Conflict Manager Name: CONFLICT MANAGER FULL NAME

CMP Implementation Date:

A Conflict Management Plan (CMP) was implemented to manage any real or apparent conflicts of interest presented by the intersection of Professor REPORTER FULL NAME’s relationship with ENTITY NAME and HIS/HER Cornell duties. The terms of the plan require an annual review and certification of compliance with the CMP. Please use this checklist to certify compliance over the time period of BEGIN DATE to END DATE.

Regarding the relationship with ENTITY NAME, Professor REPORTER FULL NAME certifies the following:

<input type="radio"/> Yes <input type="radio"/> No	<p>Disclosure: Disclosures have been made regarding the relationship with the company to all to students, fellows, postdoctoral associates, trainees and staff who are under HIS/HER supervision, or who are working on any of their research projects; to collaborators in HIS/HER research that is related to the company; to editors of journals when submitting publications; and to organizers of conferences where research results are presented that are related to the company.</p> <p>Comments:</p>
<input type="radio"/> Yes <input type="radio"/> No	<p>Involvement of Cornell Staff or Students: Cornell students, fellows, postdoctoral associates, trainees, and staff working under HIS/HER direct supervision do not have a paid appointment with the company.</p> <p>Comments:</p>
<input type="radio"/> Yes <input type="radio"/> No	<p>Concerns Addressed: Have any concerns been raised by students, employees, or collaborators concerning the potential COI managed under the CMP, or regarding research that is related to the company? If so, please describe the nature of the concern(s), and how they have been resolved.</p> <p>Comments:</p>
<input type="radio"/> Yes <input type="radio"/> No	<p>Compliance with Cornell Policies:</p> <ul style="list-style-type: none"> • Cornell resources have not been used by the company, including office materials or space, conference facilities, and lab resources or equipment, unless such use is covered by an agreement executed by the Office of Sponsored Programs or another authorized representative of the University; • Visiting appointments have not been sought or sponsored for company representatives except under the conditions outlined in the CMP; • Cornell’s name has not been used by Professor REPORTER FULL NAME to imply university endorsement of the company; Professor REPORTER FULL NAME and HIS/HER students and staff have not used Cornell resources to purchase products or services for use by the company. If purchases were made from the company, written permission was first granted by the CM. <p>Comments:</p>



<input type="radio"/> Yes <input type="radio"/> No	Human Participants: Have any human participants been involved in research that is related to the company? If so, please provide the approved IRB protocol number. Comments:
<input type="radio"/> Yes <input type="radio"/> No	Changes to Relationship: Has there been any change in Professor REPORTER FULL NAME's relationship with the company since the CMP was signed? If yes, please explain:
<input type="radio"/> Yes <input type="radio"/> No	Responsibilities of the Conflict Manager (CM): The CM has fulfilled the duties of CM by meeting with students identified in Section 1 of the CMP, confirming that all required disclosures have been made, and confirming compliance with all of the terms of the CMP. <i>Note that the CM is responsible for providing this completed checklist to the FCOI Committee.</i>

Regarding the relationship with ENTITY NAME, Professor REPORTER FULL NAME and Professor CONFLICT MANAGER FULL NAME certify that the information above is complete and accurate.

Signed:

_____ Professor CONFLICT MANAGER FULL NAME, Conflict Manager Date: _____

_____ Professor REPORTER FULL NAME Date: _____