Completing an electronic Conflict of Interest (eCOI) disclosure in eRS

If you have questions, please contact <u>COI@slu.edu</u>

977-7047: Libby Tempel, Manager 977-6242: Rita Skiba, Graduate Assistant



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← → C 🔒 https://	/ers.slu.edu/ers/logon.aspx
<u>S</u>	AINT LOUIS UNIVERSITY
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•	» Login Home About eRS Help [Mode: ERS_Admin]
eRS Home	eRS Login
Research Offices	 Please logon using your SLUNet ID and password. If you don't have a SLU network account, please call ITS 977-4000. After login, please select a role to continue to your dashboard To change or recover your password, please go to: password.slu.edu
eRS Training eRS Forms FUNding BLA\$T Change Request	SLU Net ID jane_doe Password (case-sensitive)
SLU Home	 eRS Login Problems and Solutions 1. Password Failed - Please test your password in the Password Management Portal (password.slu.edu). If your password fails this test, contact the ITS help desk - helpdesk@slu.edu to have your password reset. 2. If your current password passes the Password Management Portal test, please contact ersadmin@slu.edu. 3. If you do not have an assigned role, please contact ersadmin@slu.edu to request an eRS account.
	©eRS Patent Pending (Version 10.2, Feb. 2015)

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Use your SLU username (without "@slu.edu") and password

To start the disclosure, click "Submit My Current eCOI"

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	» Jane Doe (I	PI) Logout Home About eRS Help [Mode: ERS_Admin]
eRS Home	Jane Doe's Dashboard Pl, _eRS Demo Division - Medical	Profile
Research Offices Research Compliance Research Compliance Research Compliance Research Compliance Research Compliance Research Res	Compliance Help Reminder: The next annual Conflict of Interest Disclosure will be launched in January 2014. Please be mindful that the Conflict of Interest in Research Policy requires that any new significant financial interest must be disclosed within 30 days of discovery. New financial interests can be submitted by amending your eCOl disclosure if an eCOl disclosure is already on file. Please visit the Conflict of Interest in Research for instructions on submitting and amending your eCOl disclosure. If you have any questions, please e-mail COl@slu.edu or call 977-7047 for assistance. • Submit My Current eCOI • My COl Disclosures • 1 unsigned	• Shared Files for Me 1 new file(s)
Sponsor List	Reminders Help • Research Interest Keywords • • Effort Reports (4 unsigned) (4 unsigned) My eRS Profile Help • My Profile • My Proxies • Personal Information Manager Collaborative Work • S GDO Bactner Resistration • Research Interest Keywords	

If you have not yet completed the Financial Conflict of Interest (FCOI) training module, it will look like this:

•								» J	ane Doe (PI) Logo	out Home Abo [Mode: E	ut eRS He ERS_Admin
COI Forn COI Di Employe	n 2016 (2 İ sclosı ee: Jane	/27/2016) I re Edit Doe								COI Status CO	I Full View Help
COI	#	Version	Assign Date	COI Trained	Employee Sign Date	Admin Review Date	Review Status	COI Status	Employee Locked	Admin Locked	Closed
6621	17	Original	03/22/2016	Not Trained							
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eRS ID 82	Name Jane I	Doe	Banner lo - janedo e	eRSDe eRSDe Division (Saint L	ent/Division evelopment Team (n 9) ouis University)	Title Test		Contact	ĝslu.edu		
Save	and R	eview									
COI EN	ITRIES	}									
Save	and R	eview									

(Many people have already completed the FCOI training module. If so, see the next page.) For instructions for the CITI training, <u>click here</u>.

It may take up to 2 business days for your training information to be updated in eRS. If it has not updated, you can e-mail your completion certificate to COI@slu.edu 4

After completing the education module, you can return to eRS and complete eCOI disclosure



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» Jane Doe (PI) | Logout | Home | About | eRS Help [Mode: ERS Admin] COI Status | COI Full View COI Form 2016 (2/27/2016) COI Disclosure Edit Help Employee: Jane Doe COL# COI Trained Employee Sign Date Admin Review Date Version Assign Date Review Status COLStatus Employee Locked Admin Locked Closed 66217 Original 03/22/2016 3/23/2016 PERSONAL INFORMATION Help RSID Name Banner Id Department/Division Title Contact eRS Development Team (Test Division 9) 12 Jane Doe -janedoe jane doe@slu.edu (Saint Louis University)

Save and Review

COI ENTRIES

[1] UNRESTRICTED FUNDING

The purpose of this section is to identify any relationship in which a member of the University community is receiving non-grant funds from a potential research sponsor to the University. For example, a potential research sponsor may give funds to a researcher's departmental development account to support the researcher's activities without any restrictions. The University is grateful for such gifts, but maintains a responsibility to avoid any appearance of favorable treatment to those benefactors. Remember that within the Conflict of Interest Disclosure Form, an employee must consider their spouse and dependent children to be one and the same with the employee.

[1] Have you received any unrestricted funds in the previous or current calendar year?

🔍 Yes 🛛 🔍 No

[2] BUSINESS RELATIONSHIPS (PART 1, PERSONAL COMPENSATION AND INTELLECTUAL PROPERTY RIGHTS)

The purpose of this question is to identify any relationship in which a member of the University community is involved in a financial relationship that appears to be related to his/her institutional responsibilities and/or sponsored activities.

In this section, please report the following: (1) personal compensation such as salary, consulting fees, honoraria or other payments from the organization if those payments exceed \$5,000 per calendar year; and (2) intellectual property rights such as license fees, royalties, or milestone payments. Note that this does not include salary, royalties, or other remuneration from Saint Louis University or payments from government agencies for seminars, lectures, service on advisory committees or service on review panels.

Separately identify each applicable business relationship by selecting "New Entry" for each company or business relationship.

If you answer "Yes" to the financial interest questions, a "New Entry" button will appear

COI ENTRIES

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[1] Have you received any unrestricted funds in the previous or current calendar year?

Yes

Yes ONo

New Entry

[2] BUSINESS RELATIONSHIPS (PART 1, PERSONAL COMPENSATION AND INTELLECTUAL PROPERTY RIGHTS)

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Separately identify each applicable business relationship by selecting "New Entry" for each company or business relationship.

[2] Have you, your spouse, or your dependent children received \$5,000 or more in the past calendar year or expect to receive \$5,000 or more in the current calendar year from an entity that appears to be related to your institutional responsibilities and/or sponsored activities? Have you received any income from intellectual property rights (e.g., license fees, royalties, milestone payments)?

If you, your spouse, or your dependent children received \$5,000 or more from an entity that appears to be related to your (institutional responsibilities and/or sponsored activities, click "New Entry" at right

When you click the "New Entry" button, a new page will load with specific questions

COI Disclosure-Entry Form

COI Status Page



Please add eRS numbers or titles of related research, if applicable

[2] BUSINESS RELATION SHIPS (PART 1, PERSONAL COMPENSATION AND INTELLECTUAL PROPERTY RIGHTS) The purpose of this question is to identify any relationship in which a member of the University community is involved in a financial relationship that appears to be related to his/her institutional responsibilities and/or sponsored activities. In this section, please report the following: (1) personal compensation such as salary, consulting fees, honoraria or other payments from the organization if those payments exceed \$5,000 per calendar year; and (2) intellectual property rights such as license fees, royalties, or milestone payments. Note that this does not include salary, royalties, or other remuneration from Saint Louis University or payments from government agencies for seminars, lectures, service on advisory committees or service on review panels. Separately identify each applicable business relationship by selecting "New Entry" for each company or business relationship. Please enter N/A if the guestion is not applicable 2-1 Name of Company Test Name the individual or company with whom you have a business relationship. 2-2 Identify all applicable relationships for you, your spouse, or your Self (SLU Employee) dependent children. Spouse For example, if you are an equity owner and your child is a paid employee for a company, Child you will identify both relationships in this section by selecting option (1) Self (SLU Employee) and (3) Child. Other 2-3 Your Role Advisor Employee Consultant Director Inventor Speaker Paid Participant in Continuing Education Expert Witness Shareholder Other 2-4 Please describe your role in more detail. If you are on a speakers' bureau I speak about product A for company Test or give talks for the company, please provide the names of the drugs, devices, or products, 2-5 Amount Received in previous calendar year (Enter the dollar amount or 5025 **'O'**) Include the amount of money you received in US Dollars between January 1 and December 31 of the previous calendar year. You may gather this information from a federal form 1099, W-2, or 10-K. You may also collect this information from a deposit slip, remittance form, or other type of paper receipt. If you received multiple payments from a single Research Sponsor, please add all payments into a Total Amount. You may round to the nearest \$1,000 2-6 Anticipated amount in current calendar year (Enter the dollar amount or 6125 **'O'**) Include the amount of money you anticipate receiving in US Dollars between January 1 and December 31 of the current calendar year. This information may be a written or verbal agreement with the outside entity. This amount may be unknown until it is received; please make your best estimate. If you anticipate receiving multiple payments from a single Research Sponsor, please add all payments into a Total Amount: round to the nearest \$1,000 2-7 If this company sponsors any research or other sponsored activity in This company sponsors eRS #12345 which you are involved, or if you are involved in any research with a drug/device/product from this company, PLEASE DESCRIBE details. (Please provide title of project(s), eRS ID#(s), Grant/Award number(s), fund number(s) or

other identifiable information for all projects. If you do not know this information, please

include the name and contact information of the Principal Investigator.)

Clicking "Save" will take you back to the main list of questions

2-8 Anticipated amount in current calendar year (Enter the dollar amount or '0')	6125
Include the amount of money you anticipate receiving in US Dollars between January 1 and December 31 of the current calendar year. This information may be a written or verb agreement with the outside entity. This amount may be unknown until it is received; pleas make your best estimate. If you anticipate receiving multiple payments from a single Research Sponsor, please add all payments into a Total Amount: round to the nearest \$1,000.	a/ ie
2-7 If this company sponsors any research or other sponsored activity in which you are involved, or if you are involved in any research with a drug/device/product from this company, PLEASE DESCRIBE details. (Please provide title of project(s), eRS ID#(s), Grant/Award number(s), fund number(s) or other identifiable information for all projects. If you do not know this information, please include the name and contact information of the Principal Investigator.)	This company sponsors and #12345
2-8 If you prescribe, use, or implant drugs or devices made by this entity, PLEASE DESCRIBE details. Briefly describe the drugs/devices you utilize and how frequently you use them	I use device X, which is manufactured by this company.
2-9 If you have any students or trainees currently working on research related to this entity, PLEASE DESCRIBE the role(s) that each student play(s) in the research. Briefly describe the role(s) that each student plays in the research	I don't have any students working on projects related to the company.
 Please provide any additional information that may be relevant to the review of this business relationship. 	n/a
	Save

DELETE	Help
Delete This Answer	

If you need to make changes, scroll to the top of the entry and click "Edit Answer"

2] BUSINESS RELATION SHIPS (PART 1, PERSONAL COMPENSATION PROPERTY RIGHTS)	ON AND INTELLECTUAL
The purpose of this question is to identify any relationship in which a member of the appears to be related to his/her institutional responsibilities and/or sponse	the University community is involved in a financial relationship that ored activities.
In this section, please report the following: (1) personal compensation such as sa if those payments exceed \$5,000 per calendar year; and (2) intellectual property this does not include salary, royalties, or other remuneration from Saint Louis Uni service on advisory committees or service on review panels.	alary, consulting fees, honoraria or other payments from the organization rights such as license fees, royalties, or milestone payments. Note that iversity or payments from government agencies for seminars, lectures,
Separately identify each applicable business relationship by selecting "New Entry	" for each company or business relationship.
[2] Have you, your spouse, or your dependent children received \$5,00 year or expect to receive \$5,000 or more in the current calendar year to be related to your institutional responsibilities and/or sponsore any income from intellectual property rights (e.g., license fees, rog)	00 or more in the past calendar ar from an entity that appears ed activities? Have you received yalties, milestone payments)?
Entry: 1	Edit Answer
2-1 Name of Company Name the individual or company with whom you have a business relationship.	Test
2-1 Name of Company Name the individual or company with whom you have a business relationship. 2-2 Identify all applicable relationships for you, your spouse, or your dependent children.	Test Self (SLU Employee)
 2-1 Name of Company Name the individual or company with whom you have a business relationship. 2-2 Identify all applicable relationships for you, your spouse, or your dependent children. For example, if you are an equity owner and your child is a paid employee for a company, you will identify both relationships in this section by selecting option (1) Self (SLU Employee) and (3) Child. 	Test • Self (SLU Employee)
 2-1 Name of Company Name the individual or company with whom you have a business relationship. 2-2 Identify all applicable relationships for you, your spouse, or your dependent children. For example, if you are an equity owner and your child is a paid employee for a company, you will identify both relationships in this section by selecting option (1) Self (SLU Employee) and (3) Child. 2-3 Your Role 	Test Self (SLU Employee) Speaker
 2-1 Name of Company Name the individual or company with whom you have a business relationship. 2-2 Identify all applicable relationships for you, your spouse, or your dependent children. For example, if you are an equity owner and your child is a paid employee for a company, you will identify both relationships in this section by selecting option (1) Self (SLU Employee) and (3) Child. 2-3 Your Role 2-4 Please describe your role in more detail. If you are on a speakers' bureau or give talks for the company, please provide the names of the drugs, devices, or products. 	Edit Answer Test • Self (SLU Employee) • Speaker I speak about product A for company Test
 2-1 Name of Company Name the individual or company with whom you have a business relationship. 2-2 Identify all applicable relationships for you, your spouse, or your dependent children. For example, if you are an equity owner and your child is a paid employee for a company, you will identify both relationships in this section by selecting option (1) Self (SLU Employee) and (3) Child. 2-3 Your Role 2-4 Please describe your role in more detail. If you are on a speakers' bureau or give talks for the company, please provide the names of the drugs, devices, or products. 2-5 Amount Received in previous calendar year (Enter the dollar amount or '0') 	Edit Answer Test • Self (SLU Employee) • Speaker I speak about product A for company Test 5025

If you need to add another company, click "New Entry"

	federal form 1099, W-2, or 10-K. You may also collect this information from a deposit slip, remittance form, or other type of paper receipt. If you received multiple payments from a single Research Sponsor, please add all payments into a Total Amount. You may round to the nearest \$1,000.	t			
	2-8 Anticipated amount in current calendar year (Enter the dollar amount or '0')	6125			
	Include the amount of money you anticipate receiving in US Dollars between January 1 and December 31 of the current calendar year. This information may be a written or verbal agreement with the outside entity. This amount may be unknown until it is received; please make your best estimate. If you anticipate receiving multiple payments from a single Research Sponsor, please add all payments into a Total Amount: round to the nearest \$1,000.		l		
	2-7 If this company sponsors any research or other sponsored activity in which you are involved, or if you are involved in any research with a drug/device/product from this company, PLEASE DESCRIBE details. (Please provide tille of project(s), eRS ID#(s), Grant/Award number(s), fund number(s) or other identifiable information for all projects. If you do not know this information, please include the name and contact information of the Principal Investigator.)	This company sponsors eRS #12345			
	2-8 If you prescribe, use, or implant drugs or devices made by this entity, PLEASE DESCRIBE details. Briefly describe the drugs/devices you utilize and how frequently you use them	I use device X, which is manufactured by this company.			
	2-9 If you have any students or trainees currently working on research related to this entity, PLEASE DESCRIBE the role(s) that each student play(s) in the research. Briefly describe the role(s) that each student plays in the research	I don't have any students working on projects related to the company.			
	 Please provide any additional information that may be relevant to the review of this business relationship. 	n/a			
h ii	f you, your spouse, or your dependent children received \$5,000 or more from nstitutional responsibilities and/or sponsored activities, click "New Entry" a	n an entity that appears to be related to your New Entry at right	k		

If you add a company by mistake, click "Delete This Answer" at the bottom of the screen

2-8 Anticipated amount in current calendar year (Enter the dollar amount or '0')	6125
Include the amount of money you anticipate receiving in US Dollars between January 1 and December 31 of the current calendar year. This information may be a written or verba agreement with the outside entity. This amount may be unknown until it is received; pleas make your best estimate. If you anticipate receiving multiple payments from a single Research Sponsor, please add all payments into a Total Amount: round to the nearest \$1,000.	a/ se
2-7 If this company sponsors any research or other sponsored activity in which you are involved, or if you are involved in any research with a drug/device/product from this company, PLEASE DESCRIBE details. (Please provide title of project(s), eRS ID#(s), Grant/Award number(s), fund number(s) or other identifiable information for all projects. If you do not know this information, please include the name and contact information of the Principal Investigator.)	This company sponsors gRS #12345
2-8 If you prescribe, use, or implant drugs or devices made by this entity, PLEASE DESCRIBE details. Briefly describe the drugs/devices you utilize and how frequently you use them	I use device X, which is manufactured by this company.
2-9 If you have any students or trainees currently working on research related to this entity, PLEASE DESCRIBE the role(s) that each student play(s) in the research. Briefly describe the role(s) that each student plays in the research	I don't have any students working on projects related to the company.
 Please provide any additional information that may be relevant to the review of this business relationship. 	n/a
	Save



Continue to complete the rest of the questions in the same way.

	٩٢
	[5] FIDUCIARY DUTY
	The purpose of this question is to identify any relationship in which a member of the University community participates as an administrator within an external organization. This includes any relationship in which you see yourself as a guardian of the external organization's best interest. The University does not discourage relationships of this kind, but instead seeks only that the relationships be disclosed. Remember that within the Conflict of Interest Disclosure Form, an employee must consider their spouse and dependent children to be one and the same with the employee.
If you need	Separately identify the relationship for each applicable member. For example, if you are a volunteer board member and your spouse is a paid editor for the company's newsletter, you will need two separate entries. Answer the questions first by identifying yourself and your role for the company, and then select "New Entry" to identify your spouse and his/her role for the company.
to stop, you	[5] Do you your shouse or your dependent children currently hold a position with a non-SUI
can press	organization/company that may appear to come in conflict with your institutional responsibilities and/or sponsored activities?
save at any	
time and	[6] ADDITIONAL INFORMATION
return to	The purpose of this question is to collect any information you may want to share on the Conflict of Interest Disclosure Form.
finish the	[6] Do you have any additional information that may be relevant to your Conflict of Interest Disclosure? Or Yes O No
disclosure	
later.	Save and Review

You can add additional information in question 6, then press "Save and Review"

[5] FIDUCIARY DUTY

The purpose of this question is to identify any relationship in which a member of the University community participates as an administrator within an external organization. This includes any relationship in which you see yourself as a guardian of the external organization's best interest. The University does not discourage relationships of this kind, but instead seeks only that the relationships be disclosed. Remember that within the Conflict of Interest Disclosure Form, an employee must consider their spouse and dependent children to be one and the same with the employee.

Separately identify the relationship for each applicable member. For example, if you are a volunteer board member and your spouse is a paid editor for the company's newsletter, you will need two separate entries. Answer the questions first by identifying yourself and your role for the company, and then select "New Entry" to identify your spouse and his/her role for the company.

[5] Do you, your spouse, or your dependent children currently hold a position with a non-SLU organization/company that may appear to come in conflict with your institutional responsibilities and/or sponsored activities?

◯Yes ⑧No

[6] ADDITIO	DNAL INFORMATION					
The purpose of this question is to collect any information you may want to share on the Conflict of Interest Disclosure Form.						
[6] Doy Discl	[6] Do you have any additional information that may be relevant to your Conflict of Interest Disclosure? Image: Second					
Details	s: I have ended my financial relationship with Test3, a company I listed on my COI disclosure last year					

Save and Review

Scroll to the top of the page to review your complete disclosure. If you need to make any changes, press "COI Edit Page"

PERSONAL INFORMATION			Help
eRS ID Name Banner Id Department/Division	Title Contact		
eRS Development Team (Test 52 Jane Doe -janedoe Division 9) (Saint Louis University)	janedo	e@slu.edu	
OTENTRIES			
		COI Edit	t Page
[1] UNRESTRICTED FUNDING			
research sponsor to the University. For example, a potential research sponsor support the researcher's activities without any restrictions. The University is g of favorable treatment to those benefactors. Remember that within the Conflict and dependent children to be one and the same with the employee.	r may give funds to a researcher's de rateful for such gifts, but maintains a r of Interest Disclosure Form, an empl	partmental development acc esponsibility to avoid any ap loyee must consider their	ount to pearance spouse
[1] Have you received any unrestricted funds in the previous or cur	rent calendar year?	No	
[2] BUSINESS RELATION SHIPS (PART 1, PERSONAL COMPENSA PROPERTY RIGHTS)	TION AND INTELLECTUAL		
The purpose of this question is to identify any relationship in which a member of appears to be related to his/her institutional responsibilities and/or spore	of the University community is involved nsored activities.	d in a financial relationship th	at
In this section, please report the following: (1) personal compensation such as if those payments exceed \$5,000 per calendar year; and (2) intellectual proper this does not include salary, royalties, or other remuneration from Saint Louis L service on advisory committees or service on review panels.	salary, consulting fees, honoraria or o ty rights such as license fees, royaltie Iniversity or payments from governme	other payments from the org is, or milestone payments. N ent agencies for seminars, le	anization lote that ectures,
Separately identify each applicable business relationship by selecting "New En	try" for each company or business re	lationship.	
[2] Have you, your spouse, or your dependent children received \$5, year or expect to receive \$5,000 or more in the current calendar to be related to your institutional responsibilities and/or sponse any income from intellectual property rights (e.g., license fees, for the second se	,000 or more in the past calendar year from an entity that appears ored activities? Have you received royalties, milestone payments)?	Yes	
2-1 Name of Company Name the individual or company with whom you have a business relationship.	Test		
2-2 Identify all applicable relationships for you, your spouse, or your dependent children.	Self (SLU Employee)		
For example, if you are an equity owner and your child is a paid employee for a company, you will identify both relationships in this section by selecting option (Self (SLU Employee) and (3) Child.	1)		
2-3 Your Role	Speaker		

After reviewing your disclosure, click the checkbox next to "I have confirmed" and press "Submit"

[6] ADDITIONAL INFORMATION

The purpose of this question is to collect any information you may want to share on the Conflict of Interest Disclosure Form.				
[6] Do you have any additional information that may be relevant to your Conflict of Interest Yes				
Details: I have ended my financial relationship with Test3, a company I listed on my COI disclosure last year				

STATUS SUMMARY

Please review your responses then scroll down to the Employee Submission section to electronically sign and submit your disclosure.

By submitting this of complete and accu Division of Researce amended disclosur required to submit	electronic Conflict of Interest in Research Disclosure form (eCOI), I certify that the information contained herein is rate to the best of my knowledge; and I acknowledge my continuing obligation to inform Saint Louis University's Administration of any change in my outside activities at time of discovery by completing and submitting an e. Further, I accept the responsibility as a PI to inform others who are involved in my research that they are also an electronic Conflict of Interest in Research Disclosure form.
Not signed Submit By: Note:	Submit Date:
SIGNATURE	
Login User: Confirm: Note:	Jane Doe ✓ I have confirmed

You will now see the submitted version of your COI disclosure.

COI Form 2018 COI Disclos Employee: Jan	(2/27/2016) sure Status e Doe								COI Full \	/iew My COI D	isclosures Help
COI#	Version	Assign Date	COI Trained	Employee Sign Date	Admin Revie	iew Date	Review Status	COI Statu	Employee Locked	Admin Locked	Closed
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[1] UNRE	STRICTED F	UNDING									
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[1] H	ave you receiv	ved any unres	tricted fund	s in the previo	us or curre	ent calen	dar year?		No		
1010100											- L
PROPERT	Y RIGHTS)	ION SHIPS (P	ART1, PEF	CONAL CON	IPEN SATI		INTELLECTUA	L			
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In this sect if those pay this does n service on	ion, please rep /ments exceed ot include salar advisory comr	ort the following \$5,000 per ca ry, royalties, or nittees or servi	g: (1) persona lendar year; a other remune ice on review	al compensatior and (2) intellectu eration from Sai panels.	n such as sa ual property int Louis Uni	alary, cor rights su iversity o	isulting fees, honoi ich as license fees r payments from g	raria or other , royalties, o overnment a	payments from th r milestone payme gencies for semina	e organization nts. Note that ars, lectures,	
Separately	identify each a	pplicable busin	iess relations	hip by selecting	I "New Entry	/" for eac	h company or bus	iness relatio	nship.		
[2] Haye to ar	ave you, your ear or expect t be related to ny income fro	spouse, or yo to receive \$5,0 your instituti m intellectual	our depende 100 or more i ional respon property rig	nt children rec n the current o sibilities and/o hts (e.g., licen	ceived \$5,00 calendar ye or sponsore ise fees, roj	00 or mo ar from ed activi yalties, r	re in the past cal an entity that app ties? Have you re nilestone paymer	endar bears cceived hts)?	Yes		
2-1 Name	of Company	al or company with	h whom you hav	ve a business relat	tionship.	Test					
2-2 Identif depen F	fy all applicab dent children or example, if you	le relationship , , are an equity or	ps for you, y	our spouse, or	r your	• Self	(SLU Employee)				
S	ompany, you will i elf (SLU Employe	dentify both relat e) and (3) Child.	uonships in this	section by selecti	ing option (1)						

From your eRS dashboard, you can also access your completed disclosure in the "Compliance" box



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Higher purpose. Greater good.

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COI #	FormInstanceName	Assign Date	Assign Note	Deadline	Sign Date	Admin Review Date	Review Status	Note to Employee	COI Status	Staff Locked	Admin Closed
7	» COI Form 2016 (2/27/2016)	03/22/2016		04/21/2016	3/23/2016 4:32:05 PM	3/23/2016 4:35:55 PM	Review Complete (Admin)	Test.	No Conflict (Admin)	у	n
62832	» COI Form 2015 (2/27/2015)	02/27/2015		03/29/2015	5/8/2015 1:46:52 PM	5/8/2015 1:46:52 PM	Review Complete (Auto)	Approved based on responses	COI Exempt (Auto)	У	У
54261	» COI Form 2014 (2/1/2014)	01/29/2014		02/28/2014	4/3/2014 11:29:08 AM	4/3/2014 11:29:08 AM	Review Complete (Auto)	Approved based on responses	No Conflict (Auto)	У	У
53642	» COI Form 2012 (8/24/2012)	01/08/2013		02/07/2013			Review Complete (Admin)		Other	У	У

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COI Disclosures Employee: Jane Doe

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OI to be amer	nded: COI # 66	217 - Jane Doe	- 3/22/2016							
COI #	Version	Assign Date	COI Trained	Employee Sign Date	Admin Review Date	Review Status	COI Status	Employee Locked	Admin Locked	Closed
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977-7047: Libby Tempel, Manager 977-6242: Rita Skiba, Graduate Assistant