

RESEARCH ADVISORY COUNCIL

INVESTIGATORS ASSURANCE FORM

**Proposal Title:**

The Investigators named below affirm that they:

- 1 Have had a substantial contribution to this proposal as outlined in “Guidelines for Proposal Authorship.”
- 2 Will abide by the rules and regulations of the RAC including the Intellectual Property Policy, Research Ethics Committee Guidelines & Policy Manual, Animal Care & Use Committee Guidelines & Policy Manual, Policy on Research Conflict of Interest and Commitment and the Good Clinical Practice and Good Laboratory Guidelines.
- 3 Will submit progress and final reports and correspond with the RAC in a timely manner (Principal Investigator).
- 4 Will accept responsibility to maintain original data and consent forms and submit them for review if requested, as outlined in Policy on Research Records Retention and Access.
- 5 Will use scientific rigor and integrity in obtaining, recording, and analyzing data; and in reporting and publishing results as outlined in the Policy on Integrity in the Performance of Research and Policy on Responsibility for Research.
- 6 Will ensure that authorship of any resulting published work includes all, and only those, who have materially contributed to, and shared responsibility for, the contents of the publication as outlined in the “Guidelines for Manuscript Authorship.”
- 7 Will reveal material conflicts of interest, financial or other, that might influence their research objectivity in reality, or in the reasonable perception of others (all investigators should complete the attached Investigators Declaration of Conflicts of Interest Form).
- 8 Have personally completed the **on-line NIH Course "Protecting Human Research Participants"** <http://phrp.nihtraining.com/users/register.php> for research involving human subjects and the **on-line course Working with the IACUC: non-VA version** (<https://www.aalaslearninglibrary.org/demo/lessons.asp?strKeyID=9BE7F07D-7CF3-4413-82FB-659BF8846B14-0&Library=10&Track=12&Series=20&Course=38>) for research involving vertebrate animals (attach copy of certificate for each investigator if not previously submitted to ORA).
- 9 Will adhere to the approved proposal.

Name	ID	Signature	Date
<b>Principal Investigator(s)</b>			
<b>Co-investigator(s)</b>			

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INVESTIGATORS DECLARATION OF CONFLICTS OF INTEREST FORM

**Proposal Title:**

The KFSH&RC requires all investigators to make written declarations of their relevant interests including those of their immediate family, spouses, and children. Declarations should include all financial interests and any other relationships with any company that owns or has licensed or has rights to license the product, device or novel treatment being evaluated. This should include but not be limited to:

- a. Employment, directorship or leadership position - any full or part time employment or service as an officer or board member.
- b. Advisory role – Consultant or advisory arrangements (paid or unpaid).
- c. Stock ownership or options – any ownership interest or options in a start –up company, the stock of which is not publicly traded, or in a publicly traded company (unless in a diversified fund not controlled by the individual).
- d. Any other direct or indirect financial interest.
- e. Honoraria – payments for specific speeches, seminar presentations or appearances.
- f. Research funding.
- g. Expert testimony.
- h. Other remuneration (trips, gifts, in-kind payments ... etc.).

Investigators must declare to the RAC of any change in circumstances during the development of, or in the course of a project that would mean that they or their spouse, or children would receive or hold any of the declarable items described here.

I have read the above statement on conflicts of interest. I have nothing to declare now and I will immediately declare in writing to the RAC of any future conflicts of interest:

Name	ID	Signature	Date

I have read the above statement on conflicts of interest. I have conflicts of interest to declare now (attach a separate sheet for each investigator) and I will immediately declare in writing to the RAC of any future conflicts of interest:

Name	ID	Signature	Date

I, the undersigned, have the following conflicts of interest to declare:

\_\_\_\_\_  
Investigator name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
date