

**NEW FACULTY CONFLICT OF INTEREST IN RESEARCH TRAINING
ATTESTATION**

By my signature below I hereby attest to the following:

1. I have completed the Mandatory Conflict of Interest (COI) in Research Training as part of my faculty appointment at the University of California, Davis.
2. I understand and will comply with all state and federal regulations governing COI disclosures in research, as well as relevant UC Davis Policies (PPM 230-05 and PPM 230-07), as applicable.
3. I understand that my COI in research disclosure obligations are separate and apart from my reporting requirements under APM 025 and/or APM 671.
4. I understand that failure to abide by these rules and policies or any COI management plans imposed on my research may result in formal discipline, corrective action requirements, and/or reporting to state or federal agencies.
5. I understand that my COI disclosures are public records and will be provided to outside groups or entities upon request.
6. I understand that I must review my disclosures for accuracy and completeness prior to submission.

Faculty Name: _____ Date: _____

Faculty Signature: _____ Department: _____