Kuali Research PI Certification Questions and References

**What am I certifying?**

- (Y, N) I have a real or potential conflict of interest related to this work, as defined by the University of Maryland Policies and Procedures 11-3.10(a) or 11-3.10(b).
- If yes to above, I have or will submit a complete disclosure form in accordance with the Conflict of Interest Policies. If no to above, select N/A. (Y, N, N/A)
  - NOTE: Conflict of Interest disclosures are submitted outside of the proposal routing process through your Chair and Dean’s Offices.
- (Y, N) I have conducted lobbying efforts related to this proposal.
- (Y, N, N/A) If capital equipment is required for this project, I affirm there is no comparable equipment available on campus for direct use on this project.
- (Y, N) I will contact ORA before making changes to the scope, budget, or institutional commitment in the final proposal.
  - NOTE: In most cases, KR serves as the method for making these changes. ORA must be notified of changes being made outside of the standard routing and award negotiation procedures.
- (Y, N) To the best of my knowledge, the information submitted within the proposal is true, complete, and accurate.
- (Y, N) I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, and/or administrative penalties.
- (Y, N) I accept responsibility for the scientific conduct of this project and will provide required progress reports if the proposal results in a project award.
- (Y, N) I will provide ORA with the final copy of the proposal as submitted to the sponsor, in addition to draft technical and other provisional material provided prior to submission.
  - NOTE: Typically, this is done by departmental research administrators, but this is particularly relevant when Investigators have the ability to submit directly to sponsors or program officers without institutional signoff.
- (Y, N) This proposal will be submitted to a Public Health Service sponsor/prime sponsor, or a sponsor which follows the PHS Financial Conflict of Interest reporting guidelines.
- (Y, N, N/A) If yes to above, I attest that all individuals responsible for the design, conduct, and reporting of this project have, or will, complete his/her Financial Conflict of Interest disclosure in accordance with the University of Maryland Policies and Procedures on Financial Conflicts of Interest in Public Health Service Funded Research 11-3.10(c). If this proposal is not to a PHS sponsor, answer N/A.