

Office of Student Affairs Rutgers, The State University of New Jersey sph.rutgers.edu sphinfo@sph.rutgers.edu At New Brunswick School of Public Health Bldg 683 Hoes Lane West, Room 110 Piscataway, NJ 08854 p. (732) 235-4646 • f. (732) 235-9599 At Newark Stanley S. Bergen Bldg 65 Bergen Street, Room 701 Newark, NJ 07101 p. (973) 972-7212 • f. (973) 972-8032

Conflict of Interest in Dissertation Research

Doctoral students must address the issue of potential conflicts of interest regarding data, support for dissertation research, and the composition of the dissertation committee. In addition, students must obtain assurances from the sources of data regarding his/her ability to publish results and have access to the data after the dissertation study has been completed. A student must submit this Conflict of Interest in Dissertation Research form when he/she has:

- Passed the qualifying examination;
- Decided upon a dissertation topic, with the approval of his/her faculty advisor;
- Proposed the internal and external members of his/her dissertation committee;
- Informed the department chair regarding the dissertation topic and dissertation committee members; and
- Before a dissertation proposal defense date is scheduled.

The student and dissertation committee chair have the responsibility to provide the Doctoral Committee with information on potential conflicts of interest. To do so, the student must complete and submit this form to the Associate Dean for Academic Affairs, who will work with the Associate Dean for Research, to determine whether there is a potential conflict of interest that must be addressed by the doctoral student. *The Rutgers University policy on conflict of interest may be found at orra.rutgers.edu/conflict-interest.*

I wish to submit information regarding potential conflicts of interest regarding my dissertation research.

Name:				Student ID#:	
	Last Name	First Name	Middle Initial		
	Student Signature			Date	
	burces of Data Is the data to be used for If yes, proceed to Source	5	•		No
2.	Is the data to be used for a. Privately owned and n b. Government administr c. Obtained from a privat	your dissertation researd ot publicly available? ative data that is not pub e foundation as part of th ble?	ch: licly available? ne foundation's researcl	⊔ Yes Yes h effort Yes	No
	Do you have funding Do you have funding to s If yes, indicate which of th a. University fellowship of b. Public sector dissertat c. Public sector contract d. Private foundation fun- e. Private funding from in f. Private funding from in	ne sources noted below in r other university-sponse ion grant ding idustry	will provide funding; if no	o, proceed to question 4 Yes Yes Yes Yes Yes Yes	 No No No No No No No



Student Status:			
4. Are you a full-time doctoral student?			
5. Are you employed by the entity providing you with the		🖵 Yes	🗅 No
6. Is any member of your family employed by the entity p			
with the data and/or funding?		Yes	
Dissertation Committee Composition:			
7. Does any member of your dissertation committee hav	e a financial arrangeme	nt	
(e.g., salaried employee, contractor, or consultant) with			
the data or funding your dissertation research?		🖵 Yes	🗅 No
If yes, please explain:			
Assurances Regarding Access to Data and Publication			
If your sources of data is not in the public domain and if y	our data and funding su	pport are from a priv	vate or
public entity, please complete the following question.			
8. Have you obtained assurances in writing from your so	ources of data and		
financial support regarding:			
a. Freedom to publish your findings?		🖵 Yes	🗆 No
b. Access to your data after completion of your disser			
c. Access to your data by members of your dissertation	on committee for purpos	es	
of replication and verification of your study results?			
If you answered yes to any of the above (Question 8),	please attach documen	tation of the assura	nces.
 Do you understand that you still need to complete and Investigator Financial & Other Personal Interests Disc submitting your IRB? 	losure Form when	🖵 Yes	No
Dissertation Committee Chair Signature	Date		
Department Chair Signature	Date		
To Be Completed by Associate Deans:		RETURN	то
Potential conflicts of interest have been reviewed:	OFFICE (
□ No further information is required. □ Additional info	STUDENT AF		
	fination is required.		
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Director of Doctoral Studies Signature	Office of Student Af		
		Office of the Regist	rar
Associate Dean for Research Signature	Date	Department Chair	Hoo Chain
Associate Dear for Research Signature	Dale	Dissertation Commi Student	illee Chair
		Student	