Reporting Conflicts of Interest for Studies with No Private or Federal Funding

1. Login to the eCOI system(https://or-forms.ucdavis.edu/)

Use Firefox, Chrome, or the most up-to-date version of your chosen browser. You may need to log in using your Kerberos username and password.

Note: If you are not able to create a Form 800, you may need to have PI Access granted. Please email Research Compliance and Integrity (RCI) at or\_coi@ou.ad3.ucdavis.edu for access or for guidance in completing the form.

2. Start a new Form 800 submission

Form 800 (Non-PHS Government Sponsors/Human Subject Research) Must be filed at time of proposal, annually, and/or within 30 days of acquiring a new outside financial interest.
Required for all investigators (all persons who have responsibility for the design, conduct or reporting of the research). List of non-PHS government sponsors

- 3. As needed, complete the demographics section of the form with the appropriate information.
- 4. In the project details please do the following:
  - A. For type of Proposal/Disclosure select "New Project"

Proj	ect	Deta	ils
_			

D.

Type of Proposal / Disclosure	000	New Project Continuation/Additional Funding New Sponsor on Existing Project Add Other Investigator to the Project Change of Principal Investigator
	$\bigcirc$	$Change \ in \ your \ existing \ financial \ interest \ or \ a \ newly \ discovered/acquired \ significant \ financial \ interest \ (SFI)$

- B. Previous award number may be left blank.
- C. For Research Project, select this project if available.

Previous award numbe	(if applicable)			
Research Proje	t Select Can't find your project?		~	
The following ste <ol> <li>Select the pr</li> <li>Notify co-inv</li> <li>Return to F</li> </ol>	ps are required if filing a Form 800 oject and add applicable co-investigat estigators (creates a draft form 800 if orm 800	ors needed and emails instructions to co-investigators)		
Your Projects Add new project				
f not available, add this project in the system.				

## Add Project

Select Project Type	~
Select Project Type	йс.
Sponsored Award	
Gift Lð	
Enter a short project name (for display pu	irposes)

E. For funding entity, search for "UC Davis" and select this as the funding entity. We understand that the project does not actively receive any funding; however, all studies done under the auspices of one's appointment at UC Davis could be seen to be funded by UC Davis through in-kind salary support.

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Funding Entity Search	UC Davis	
Funding Entity	UC DAVIS 6763	^

F. For Type of Funding Entity please select "Departmental Funded (if the project is FDA regulated)". Please make this selection even if the project is not FDA regulated.

Type of Funding Entity	Department Funded (if the project is FDA regulated)	~		
	Select	٦		
Budget Period From	Non-Public Health Service Federal entity (e.g. NSF)			
	Subaward from above federal entities from/through another entity			
Budget Period To	Non-governmental Sponsor, Project involves Human Subjects			
	California Institute of Regenerative Medicine (CIRM)			
Project Begin Date	Department Funded (if the project is FDA regulated)			
	UCOP Funded Programs			

- G. For Budget Period From and Budget Period To a date must be entered. Please simply put the time that the project is expected to be active.
- H. For Project Begin Date and Project End Date, please use the same dates as above in step 4G.
- I. For funding amount, please indicate \$0.
- J. Is this amount an estimate? Please indicate "yes"

Budget Period From	MM/DD/YYYY				
Budget Period To	MM/DD/YYYY				
Project Begin Date	MM/DD/YYYY				
Project End Date	MM/DD/YYYY				
Funding Amount	\$ Amount of Funding				
	Is this amount an estimate?				
	O Yes O No				

K. Human subjects – Please indicate "yes" and provide the IRBNet ID Number.

		Human Subjects and	I IRB #	Does this	project involve Human Subjects?
				•	Yes No
		IRB	Net ID	An IRBNet ID	D is required. To obtain one, please create a project in IRBNet. ID (exclude suffix)
	L.	SFI Disclosure – SFI Disclosure Do you, your conducted u @ Yr O N	- Pleas r spouse, regi- under the prop es lo	SE SELECT "	YES" trner, or dependent children have any ' <u>Significant Financial Interests</u> ' (as defined in PPM 230-05.II.G) RELATED to the work to be vas received <u>within the last twelve months</u> or that you expect to receive in <u>the next twelve months</u> ?
5.	Sig Sig	n and submit the gn and submit	e disclo	sure.	
		Signature	First La	ast Name Save Draft	Finalize
			Based or	n your response	es you are required to complete a supplemental Statement of Economic Interest.

6. You will then be prompted to complete the Supplemental form which is where you will specify the nature and amount of the Conflict of Interest.