GUIDELINES ON RESEARCH ETHICS AND CONDUCT OF RESEARCH

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INFORMATION NOTE

GUIDELINES ON RESEARCH ETHICS AND CONDUCT OF RESEARCH

With an increase in Research and Development (R&D) activities within universities, as well as public and private organisations, it is important to ensure that high standards are maintained. In this context, recognising the urgent need for institutions to have appropriate, satisfactory and recently reviewed guidelines, the Mauritius Research Council (MRC) has initiated work on the preparation of a set of guidelines named *Guidelines on Research Ethics and Conduct of Research*.

The first part of this document outlines the key elements of good research practice, defining the approach to be adopted when planning and carrying out research. The guidelines also deal with the recording, reporting and application of the results of research.

Although allegations of scientific misconduct are rare, the MRC considers that such incidents can influence the credibility of scientific research overall. In a bid to encourage impeccable scientific integrity and ensure protection of research personnel from malicious accusations, the second part of this document outlines the approach for investigating allegations of research misconduct.

The Council is of the view that scientific practice in Mauritius should be in accord with international guidelines as far as possible, and expects all researchers, both clinical and non-clinical, to adopt the highest achievable standards in the conduct of their research. The guidelines being proposed by the MRC have been adapted from established procedures which are clearly defined in the following documents: *Good Research Practice* and *MRC Policy and Procedure for Inquiring into Allegations of Scientific Misconduct (*Medical Research Council Ethics Series, UK, 2000 and 1997, respectively).

The first draft of the *Guidelines on Research Ethics and Conduct of Research* is being circulated for information and to encourage an exchange of views. The aim is to obtain a finalised document that addresses the current requirements and sets the standard for future work, while retaining sufficient flexibility to allow adaptation as new technology emerges. It is expected that individual establishments will draw up their own guidelines using this document as a template, taking into account particular local working contexts and ensuring that these incorporate the standards defined by the Mauritius Research Council.

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I STATEMENT

Research and the pursuit of the truth are vital functions of this Name of Institution[1]. The broad principles that guide research are well established, and pivotal to these are the maintenance of high ethical standards. These guidelines should be seen as a framework for sound research practice and for the protection of individual research workers at all levels from possible misunderstandings. All queries regarding the observance of the guidelines should be directed to Name of Institution.

II CODE OF CONDUCT FOR THE RESPONSIBLE PRACTICE OF RESEARCH

1. GENERAL PRINCIPLES

1.1 It is a basic assumption of Name of Institution that research staff are committed to high standards of professional conduct. Researchers have a duty to ensure that their work enhances the good name of Name of Institution and the profession to which they belong.

1.2 Researchers should only participate in work which conforms to accepted ethical standards and which they are competent to perform. When in doubt they should seek assistance with their research from their colleagues or peers. Debate on, and criticism of, research work are essential parts of the research process.

1.3. Name of Institution and its researchers have a responsibility to ensure the safety of all those associated with the research. It is also essential that the design of the project takes into account any other relevant ethical guidelines. Where research procedures are of a kind requiring approval by a human or animal experimentation ethics committee, or by other validly constituted regulatory committees**, research must not proceed without such approval**.

[1] Insert the name of the Institution (this applies throughout the text).

1.4 If data of a confidential nature are obtained, for example from the individual patient records or from certain questionnaires, confidentiality must be observed and researchers must not use this information for their own personal advantage or that of a third party. Secrecy may also be necessary for a limited period in the case of contracted research or of non-contractual research that is under consideration for patent or other intellectual property protection. In general, however, research results and methods should be open to scrutiny by colleagues within the Institution and, through appropriate publication, by the profession at large.

2. DATA STORAGE AND RETENTION

2.1 Data (including electronic data) must be recorded in a durable and appropriately referenced form. Data management should comply with relevant privacy protocols[2].

2.2 Data must be held for sufficient time to allow access and reference. For data that is published this may be for as long as interest and discussion persists following publication. It is recommended that the minimum period for retention is at least five years from the date of publication but for specific types of research, such as clinical research, fifteen years may be more appropriate.

2.3 Wherever possible, original data must be retained in the department or research unit in which they were generated. Individual researchers should be able to hold copies of the data for their own use. However, retention solely by the individual researcher provides little protection to the researcher or Name of Institution in the event of an allegation of falsification of data. When the data are obtained from limited access databases, or via a contractual arrangement, the location of the original data must be identified, or key information regarding the database from which it was collected must be noted, and this must be retained by the researcher or research unit. In all cases, prior to the publication of research findings a **Location of Data** form must be completed (see Appendix 1).

[2] If such a protocol is not in place, this may need to be set up.

2.4 Data related to publications must be available for discussion with other researchers. Where confidentiality provisions apply (for example, where the researchers or Name of Institution have given undertakings to third parties, such as the participants involved in biomedical research), it is desirable for data to be kept in a way that reference to them can be made without breaching such confidentiality.

2.5 Confidentiality agreements[3] have to be developed to protect intellectual property rights (see IPR policy[4]) belonging to Name of Institution, or to pass on 'obligations of confidence' to others regarding confidential information received by Name of Institution. Where agreements limit free publication and discussion, such limitations and restrictions must be explicitly agreed in writing.

2.6 It is the obligation of the researcher to establish whether confidentiality agreements apply. The Head of Department/Unit is normally required to inform researchers of their obligations regarding these provisions. All confidentiality agreements should be made known at an early stage to the appropriate senior executive.

2.7 Researchers are responsible for ensuring the appropriate security of all confidential material associated with their projects, including that held in electronic media. Where computing systems are accessible through networks, particular attention to security of confidential data is required. Security and confidentiality must be assured in a way that copes with multiple researchers, including the departure (or transfer to other organisations) of individual researchers.

3. AUTHORSHIP

3.1 Minimum requirement for authorship should be in accord with the 'Vancouver Protocol' as set out in the fifth edition (1997, updated in 1999) of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals.

[3] Such agreements may need to be developed, if they are not already in place.

[4] If absent, an appropriate Intellectual Property Rights (IPR) policy may need to be formulated.

Authorship is considered substantial participation, where all the following conditions are met:

- in the conception and design, or analysis and interpretation of data;
- drafting the article or revising it critically for important intellectual content; and
- final approval of the version to be published.

Participation solely in the acquisition of funding or the collection of data does not justify authorship. General supervision of the research group is not sufficient for authorship. Any part of an article critical to its main conclusion must be the responsibility of at least one author. An author's role in a research output must be sufficient for that person to take responsibility for at least that part of the output in that person's area of expertise. No person who is an author, consistent with this definition, must be excluded as an author without their permission in writing.

3.2 Authorship of a research output is a matter that should be discussed between researchers at an early stage in a research project, and reviewed whenever there are changes in participation. If there are conflicts arising through disputes about authorship, then the appropriate senior executive should be notified for a decision.

3.3 When there are several authors of a research output, one co-author (by agreement among the authors) should be nominated as executive author for the whole research, and should take responsibility for record-keeping regarding the research output.

3.4 Where the research is published (including in electronic format), one author will be given principal status with the responsibility for signing a **Statement of Authorship** form, ensuring that all co-authors are in agreement with their inclusion and that no person entitled to authorship, as defined in clause 3.1, has been excluded (see Appendix 2).

3.5 The authors must ensure that others who have contributed to the work are recognised in the research output. Courtesy demands that individuals and organisations providing facilities should also be acknowledged.

4. PUBLICATION

4.1 Publication of multiple papers based on the same set(s) or subset(s) of data is not acceptable, except where there is full cross-referencing within the papers (for example, in a series of closely related work, or where a complete work grew out of a preliminary publication and this is fully acknowledged). An author who submits substantially similar work to more than one publisher must disclose this to the publishers at the time of submission.

4.2 The organisation believes that peer assessment of research outcome is an important component in the validation of research. Wherever possible, Name of Institution expects researchers to submit their research for peer review.

4.3 The organisation recognises the importance of research being communicated to the public media. Ideally, this should occur after peer appraisal. Where research is reported in the public media prior to peer review, the reporting should be strictly based on the research data and findings.

4.4 Publications must include information on the sources of financial support for the research. Financial sponsorship that carries an embargo on such naming of a sponsor should be avoided.

4.5 Publications involving either a student enrolled with Name of Institution, or staff member must acknowledge the work was carried out at Name of Institution.

4.6 Deliberate inclusion of inaccurate or misleading information relating to research activity in curriculum vitae, grant applications, job applications or public statements, or the failure to provide relevant information, is a form of research misconduct. Accuracy is essential in describing the state of publication (in preparation, submitted, or accepted), research funding (applied for, granted, funding period), and awards conferred, and where any of these relate to more than one researcher.

4.7 All reasonable steps must be taken to ensure that published reports, statistics and public statements about research activities and performance are complete, accurate and unambiguous.

5. SUPERVISION OF STUDENTS/RESEARCH TRAINEES

Reference should be made to the Name of Institution's equivalent to the 'Code of Good Practice for Postgraduate Student Research and Supervision'.[5]

5.1 The Head of Department/Unit should ensure that supervision of each research student/trainee is assigned to specific, responsible and appropriately qualified senior researcher(s), and that the ratio of research students/trainees to supervisors is low enough to assure effective intellectual interaction and effective oversight of the research at all times.

5.2 Supervisors or Heads of Departments/Units should provide each research student/trainee with relevant written material on national and institutional guidelines for the conduct of research, including (when applicable) those covering ethical requirements for human or animal studies, requirements for confidentiality, and occupational health and safety matters.[6]

5.3 Supervisors should provide guidance in all matters of good research practice. This includes discussing with the student, at the outset, relevant issues of research conduct and ethics, as well as IPR, and referring any problems/queries to the Head of Department/senior executive for consideration.

5.4 Supervisors must ensure, as far as possible, the validity of research data obtained by a student under his/her supervision.

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[5] This document may need to be prepared, if not available.

As a guide for preparing their own Code, Institutions may consult the example from the University of Western Australia available online at: www.research.uwa.edu.au/policy/pg/code.html.

[6] It is expected that appropriate guidelines will be available.

6. DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST

6.1 Disclosure of any potential conflict of interest is essential for the responsible conduct of research. Researchers have an obligation to disclose any affiliation with, or financial involvement in, any organisation or entity with a direct interest in the subject matter or materials of researchers. A conflict of interest may arise if any organisation or entity with an interest in the subject matter provides direct benefits to the researchers such as sponsorship of the investigation, or indirect benefits such as the provision of materials or facilities, or the support of individuals such as provision of travel or accommodation expenses to attend conferences.

6.2 Other examples of conflict of interest include situations where a researcher (or their spouse or dependent) has a financial interest (equity, directorship, consultant) in the funding agency or in an agency being paid from the grant funds, or where the terms of a new grant from a funding agency require disclosure of project data from a related project and the terms of the related project grant prevent that disclosure (see clause 2.5).

6.3 When a conflict of interest arises at the time of reporting or proposing research, and this conflict of interest has the potential to influence research and investigations, publication and media reports, grant applications, and applications for appointment and promotion, the researcher must disclose the details 'in confidence' to the appropriate senior executive. That person will then decide whether a conflict of interest exists and if so, what further action should be taken. That action will include consultation with the researcher and may also involve consultation with the funding agency or other parties to ensure that the conflict of interest does not compromise the research, or Name of Institution's interests. In some circumstances, it may be necessary to reject or terminate a research project, or to disclose the conflict of interest to the editors of journals, or the readers of published work arising from the research.

III PROCEDURES FOR DEALING WITH ALLEGATIONS OF RESEARCH MISCONDUCT

1. INTRODUCTION

The Guidelines on Research Ethics and Conduct of Research aim to ensure a research environment that will minimise the incidence of misconduct in research. If allegations of misconduct are made, however, the following procedures should be invoked to ensure that all parties involved are dealt with fairly.

2. DEFINITION OF RESEARCH MISCONDUCT

'Misconduct' or 'scientific misconduct' is taken here to mean fabrication, falsification, plagiarism[7] or other practices that seriously deviate from those that are commonly accepted within the scholarly and scientific communities for proposing, conducting, or reporting research. It includes the misleading attribution of authorship including the listing of authors without their permission, crediting work to others who have not in fact contributed to the research, and the lack of appropriate acknowledgement of work primarily produced by a research student/trainee or associate. It does not include honest errors or honest differences in interpretation or judgements of data.

Examples of research misconduct include, but are not limited, to the following:

- ***Misappropriation:*** a researcher shall not intentionally:

(a) engage in plagiarism, which shall be understood to mean the presentation of the documented words or ideas of another as his/her own, without appropriate reference to the original source;

(b) make use of any information in breach of any duty of confidentiality associated with the review of any manuscript or grant application;

(c) intentionally omit reference to the relevant published work of others for the purpose of inferring personal discovery of new information.

[7] Plagiarism does not include standard stylistic constructions commonly used to describe procedures, etc.

- ***Interference***: a researcher shall not intentionally and without authorisation, take (or sequester, or materially damage) any research-related property of another, including apparatus, reagents, biological materials, writings, data, hardware, software, or any other substance or device used or produced in the conduct of research.
- ***Misrepresentation***: a researcher or reviewer shall not with intent to deceive, or in disregard for the truth:

  (a) state or present a material of significant falsehood;
  (b) omit a fact, so that what is stated or presented as a whole states or presents a material of significant falsehood.

- ***Coercion***: a researcher shall not apply pressure of any sort to colleagues or subordinate researchers to engage in the falsification of research data or other forms of research deceit.

3. PROCEDURES

3.1 PROTECTION OF INTERESTED PARTIES

3.1.1 Heads of Departments and other appropriate senior executives should be available to advise on integrity in research. Their task should be to give confidential advice to staff and to research students/trainees, about what constitutes research misconduct, the rights and responsibilities of a potential complainant, and the procedures for dealing with allegations of research misconduct within Name of Institution.

3.1.2 Allegations of research misconduct require very careful handling. When an allegation is made, the protection of all interested parties is essential. Interested parties might include:

(a) the person bringing the allegation;

(b) the person against whom the allegation is made;

(c) staff, students and trainees working with persons making an allegation, or with persons against whom an allegation is made;

(d) journals and other media reporting research subject to suspected, alleged, or demonstrated research misconduct;

(e) funding bodies supporting persons or research involved;

(f) the public, for instance if a pharmaceutical or related product is involved; and

(g) the community of scholars.

Adequate protection of the complainant and the accused demands absolute confidentiality and reasonable speed in the early stages of investigation. On the other hand, the protection of other parties might involve some disclosure. Such judgements should be made by the appropriate senior executive.

3.2 THE RECEIPT OF COMPLAINTS

Allegations of misconduct in research might originate outside the organisation from other institutions, in learned journals or in the press. Allegations from outside the organisation should be dealt with directly by the appropriate senior executive. Inside the organisation, allegations might come from other members of staff, or from research students/trainees. The latter might feel themselves to be in a difficult situation because their degrees and future careers can depend on interaction with a supervisor. The identity of the complainant will remain confidential, but under no circumstances will an anonymous complaint be the basis for a formal proceeding.

(a) Advisers on integrity in research

Heads of Department shall be available to advise on integrity in research. The task of each Head of Department should be to give confidential advice to staff and to research students/trainees, about what constitutes misconduct in research, the rights and responsibilities of a potential complainant, and the procedures for dealing with allegations of research misconduct within the organisation.

(b) Designated people to receive formal complaints

A senior staff member or nominee of the Head of Department should consider the material provided by the complainant, and should decide whether the allegation should be dismissed or investigated further. The appropriate senior executive must be informed immediately a complaint is received and must be kept informed, as the case progresses. If a preliminary investigation is to proceed, it must be authorised by the senior executive.

4. THE INVESTIGATION

4.1 THE PRELIMINARY INVESTIGATION

If there is the possibility of a charge of serious misconduct, the appropriate senior executive must initiate a preliminary investigation.

4.1.1 *Action with staff member concerned*

(a) As good practice, if there is to be a preliminary investigation of the allegation under existing personal procedures[8], the staff member concerned should be informed in writing and given an opportunity to respond in writing. The name of the complainant should not be released.

(b) The appropriate senior executive might require the staff member to produce experimental data files, or other material to be kept secure, but not disclosed, during the preliminary investigation.

[8] These procedures should already be in place.

4.1.2 Form of the investigation

(a) The form of the preliminary investigation will depend upon the case, and must be decided by the appropriate senior executive. The senior executive must have the power to conduct the preliminary investigation in person, if that is appropriate. In some cases, there will need to be a small committee from inside the Institution, but from areas not affected by the research in question. In other cases, it might be necessary to seek expert help from outside the Institution.

(b) The preliminary investigation should be conducted expeditiously and, as far as is possible, confidentiality should be maintained.

(c) The preliminary investigation should be limited to determining whether a sufficient case exists for formal charges of misconduct to be laid.

4.1.3 Action upon completion of the preliminary investigation

(a) *No case exists*

(i) If no case is found to exist, the staff member concerned should be informed that there will be no further action taken, and the conclusion should be recorded on his/her file and, as far as possible, in a form satisfactory to the staff member.

(ii) If it is considered that the complainant has brought charges improperly, the complainant should be disciplined. If the charges were reasonably brought but incorrect, the case should cease.

(iii) The senior executive will need to exercise judgement at this point, to determine whether there are individuals or organisations to be informed. This will depend upon the degree of confidentiality that has been achieved.

(b) *A case is seen to exist*

(i) If the preliminary investigation finds cause for further investigation, this should be commenced as soon as possible. The first step is the provision of particulars to the staff member in writing. The staff member then has thirty days in which to respond in writing. The senior executive will need to consider whether the staff member should be suspended from all or part of his/her duties at the point when particulars are supplied. If further investigation leads to the staff member being cleared of the charge(s), the same considerations arise as if no case had existed.

(ii) If the staff member is in receipt of a grant from an external funding body, the senior executive will advise the Secretary of that funding body, in strictest confidence, that a case is being formally investigated on the understanding that the funding body will not terminate the grant until the outcome of the fraud investigation is known.

4.2 THE FORMAL INVESTIGATION

4.2.1 *Employment procedures*

Formal procedures for dealing with misconduct should normally be governed by staff Conditions of Employment[9].

4.2.2 *Special requirements*

There are other matters that need to be considered in setting up adequate procedures for dealing with a formal investigation into research fraud or serious misconduct.

(a) For example a three-person committee, including a nominee of the Chief Executive, a nominee of the representative of the local branch of the union and a senior member of the legal profession (or a person with appropriate experience in industrial relations, appointed by agreement between the senior executive and the union representative).

[9] The relevant conditions of employment of the Institution/Department.

(b) The Committee should have access to legal advice and to expert advice on the research subject. The organisation should pay for this advice and ensure that the Committee members are indemnified.

(c) While confidentiality remains important during a formal investigation, other matters might take precedence.

(i) It is important to protect the accused. If the charges are dismissed, he/she will need to be reinstated with a clean record. A charge of misconduct could damage a person's future prospects and defamation action could result unless the procedures laid down are followed carefully.

(ii) It is important to protect the complainant if there is a possibility of victimisation which could affect his/her career seriously.

(iii) There might be a strong reason to inform the publishers of a journal that the authenticity of a paper (or papers) is in doubt. A false paper might be dangerous to the community.

It is not possible in advance to state what should happen. The adjudicating body in the formal investigation must determine what should be made public and when, bearing in mind the interest of all concerned.

(d) If allegations are made which appear to cast doubt on the validity of one or more research publications produced by a staff member, it might be necessary to investigate the person's past research as well as that covered by the current allegations.

(e) If the claim of research misconduct has been substantiated, it is important that the position of research students/trainees and staff working with the accused be clarified. In some cases, if there has been misconduct, it might be necessary to provide compensation to innocent people who have been affected.

4.2.3 *Action following the formal investigation*

(a) If a person is found guilty, the organisation should take appropriate disciplinary action, without delay. Relevant publishers and sponsoring agencies should be notified.

(b) If a person is found to be innocent, action might be needed to redress any damage resulting from the allegation.

(c) (i) If an external funding body has been advised of a formal investigation and the staff member has been exonerated, then the external funding body is to be advised accordingly.

(ii) If the staff member has been found guilty, and is in receipt of a current grant from an external funding body, or was in receipt of a grant from an external funding body when the misconduct occurred, or is currently an applicant for a grant from an external funding body, then the senior executive must provide the Secretary of such funding bodies with a full written report of the formal investigation.

4.2.4 *Action if the accused resigns*

If a staff member charged with serious misconduct resigns, proceedings should cease. The Institution cannot take any further action against the staff member. This is a reasonable requirement to ensure fair treatment to the person concerned.

It is not necessarily satisfactory for an enquiry into research fraud or misconduct to be abandoned, if a resignation is received. Almost always, others will have been, or will be, affected, perhaps very seriously, unless the facts are determined. It should therefore be part of the Institution's procedures that, in the event of resignation, an enquiry is convened to report on the status of the research and on any remedial action needed to protect affected people and the public. Those who need to be considered are listed in section 3.1.2 (Protection of interested parties) of these guidelines. In addition, external funding bodies that supported the research or the researcher must receive a report on the status of the research and on any remedial action recommended.

REFERENCES

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   Online at: www.research.uwa.edu.au/policy/pg/code.html

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   Online at: www.acponline.org/journals/annals/01jan97/unifreqr.htm

APPENDIX 1

NAME OF THE INSTITUTION

Letterhead

LOCATION OF DATA FORM

Wherever possible, original data should be retained in the department in which they were generated. It is 'data' on which publications are, or will be based that are retained, or their location recorded, not materials. Data should be safely held for as long as readers of publications might reasonably expect to be able to raise questions that require reference to it. This should be at least five years. Where it is impossible or impracticable to hold data, a written indication of the location of the data or key information regarding the location (for example, the way in which it was called up from a limited-access database), must be kept in the department. The location of the researcher's research diary may be sufficient if the key information is recorded in that.

Publication title: _____

_____

Submitted/resubmitted to: _____

_____

on: _____.

The primary data on which this research publication is based are:

☐ in the department(s) of the Responsible or Principal Author(s)

☐ in the following location(s):

_____

_____

_____

_____

_____

or ☐ no data are needed to check the conclusions of this paper

SIGNATURE: _____

Responsible or Principal Author(s)

DATE:_____

APPENDIX 2

NAME OF THE INSTITUTION

LETTERHEAD

STATEMENT OF AUTHORSHIP FORM

Responsible or Principal Author(s): _____

Department(s): _____

Institution(s): _____

The authors of the paper entitled: _____
Submitted/resubmitted to: _____
on: _____ are the undersigned and there are no other authors.

NAME	DEPARTMENT / INSTITUTION	SIGNATURE

Statement by the Responsible or Principal Author:

I am the Responsible or Principal Author of the above publication and certify that all co-authors listed above are in agreement with their inclusion and that no person entitled to authorship as defined in the Name of the Institution[1] Guidelines on Research Ethics and Conduct of Research has been excluded.

SIGNATURE: _____

DATE: _____

[1] Use the appropriate Institution's name here

APPENDIX 3

NAME OF THE INSTITUTION

LETTERHEAD

DECLARATION ON CONFLICT OF INTEREST

In accordance with the Name of the Institution[1] Guidelines on Research Ethics and Research Conduct, recipients of research grants are required to declare any conflict of interest that would interfere with or compromise the performance of research supported by the funding agency.
Conflicts of interest may arise because an investigator, or someone close to the investigator, stands to benefit financially from the research or the carrying out of the project or because inconsistent or incompatible obligations exist.

Examples of conflict of interest are:

(i) Where an investigator (or where their spouse or dependent) has personal equity holdings in a company that would be affected by the outcome of the research, or that produces the product(s) being evaluated or used in the research;

(ii) Where an entity with a direct interest in the subject matter or materials provides an investigator with benefits, materials or facilities for activities other than research (for instance, travel or accommodation expenses to attend conferences, receipt of honoraria or fees for service); or

(iii) An inability to satisfy clauses in an existing research contract with a third party (government or a commercial sponsor) that contains a relevant agreement on conflict of interest. Such clauses may relate to disclosure of data from related projects supported by other sponsors. Alternatively, the agreement may require the disclosure of material that is to be kept confidential to the current project.

Where there are circumstances which could lead to a conflict of interest, or be seen to do so, each investigator is required to divulge 'in confidence' sufficient information to the responsible Institution to allow a determination on the matter. This Institution may need to consult the sponsor to ensure that the conflict of interest does not compromise the research funded by the sponsor. It must be stressed that the existence of a conflict of interest does not automatically disqualify a researcher from participating in a project.

[1] Use the appropriate Institution's name here

ONE OF THE FOLLOWING TWO STATEMENTS MUST BE COMPLETED

EITHER

DECLARATION

I/We, the undersigned investigator(s) declare that to the best of my/our knowledge and belief the acceptance of a grant/award through the Name of the Institution* for this project does not involve me/us in any conflict of interest. I/We undertake to inform the Name of the Institution* of any conflict of interest in my/our research that may arise during the currency of the grant/award and the Name of the Institution* may so inform the funding agency.

PROJECT TITLE : _ _____

_____

_____

FUNDING AGENCY: _____

Principal	Name: _____	Dept:_____
Investigator	Signature: _____	Date_____
Associate	Name: _____	Dept:_____
Investigator	Signature: _____	Date:_____
Associate	Name: _____	Dept:_____
Investigator	Signature: _____	Date:_____
Associate	Name: _____	Dept_____
Investigator	Signature: _____	Date:_____

* Use appropriate Institution's name here.

OR

I have not signed the above declaration and undertake to disclose 'in confidence' to the person(s) responsible for research management in the Name of the Institution* all matters, which to the best of my knowledge and belief will involve a conflict of interest.

PROJECT TITLE: _____
_____
_____

FUNDING AGENCY: _____
_____

Principal Investigator:	Name: _____	Dept: _____
	Signature:_____	Date: _____
Associate Investigator	Name: _____	Dept: _____
	Signature: _____	Date: _____
Associate Investigator	Name: _____	Dept: _____
	Signature: _____	Date: _____
Associate Investigator	Name: _____	Dept: _____
	Signature: _____	Date: _____

THIS DECLARATION MUST BE SIGNED BEFORE ANY RESEARCH GRANT IS AWARDED

* Use appropriate Institution's name here.