## **CONFLICT OF INTEREST MANAGEMENT PLAN FOR PARTY 1**

## Background

- 1. Employee's name, position, and department at MSU
- 2. Details on the nature of the outside interest/relationship and the employee's level of involvement
- 3. Any other relevant information on the situation as it exists or its history
- 4. Given the relationship between *Party 1, the outside interest,* and MSU, there is a potential for conflict of interest. In order to assure compliance with MSU policy, *Party 1* agrees to abide by the following safeguards.

## Safeguards

Safeguards explain how the conflict will be managed and may cover such categories as:

- 1. COMMITMENT
- 2. TRANSPARENCY
- 3. AVAILABILITY OF OUTSIDE COUNSEL
- 4. **RESEARCH INTEGRITY**
- 5. USE OF STUDENTS
- 6. MONITORING

Legal Statement required on all COI Plans: *Party 1* acknowledges that MSU will monitor and evaluate this plan as well as policies related to it, and, at any time should MSU determine, in its sole discretion, that the plan is not sufficient to guard actual or apparent conflicts of interest or is otherwise not in the interest of MSU, may determine the conflicts as not capable of management and may ask *Party 1* not to pursue the conflicting activities while an employee of MSU.

## **Acknowledgement and Agreement**

By signing below, I, *Party 1*, acknowledge my agreement and intent to comply with the principles and safeguards of this Conflicts Management Plan.

Signature of Employee	Date
Signature of Plan Manager	Date
Signature of Compliance Manager	Date