**G. Co-PI ASSURANCES (If more than two Co-PIs, copy assurances page as needed.)**

**Co-PI NAME:**

**Sponsor**:

**Proposal Title:**

1. **As Co-PI I certify, by initialing each line, that:**

      The information provided about this proposed project and submitted within the application is true, complete, and accurate to the best of my knowledge,

      Any false, fictitious, or fraudulent statements or claims may place me at criminal, civil, or administrative penalties,

      I have not been debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by a Federal department or agency,

      I accept responsibility for the scientific conduct of the project and will provide the required progress reports if a grant/contract is awarded as a result of the application,

      I ensure all personnel will complete any training required by UCCS and/or the Sponsor,

      My annual conflict of interest disclosure is current,

      I will direct this project in compliance with UCCS policies, the terms and conditions of UCCS’s agreement with the sponsor and with all applicable laws and regulations, including export controls, misconduct in research, conflict of interest, intellectual property, and the use of humans and animals and biohazards in research, and

      I will uphold the responsibilities of PI-ship. Policy 900-001, Roles and Responsibilities for Sponsored Programs Administration: <https://www.uccs.edu/vcaf/policies.html>

1. **Conflicts of Interest:**
2. Do you have any financial or other personal interests, which could, or could have the appearance of, influencing the design, conduct, or reporting of the proposed project? For further details, see the complete Conflicts of Interest and Commitment in Research and Teaching policy, which may be accessed at <https://www.cu.edu/ope/aps/5012>

**Please initial the appropriate line:** **YES** **NO**

**If yes,** attach a copy of your conflict of interest management plan. Attached

1. During the past twelve (12) months have you or an associated entity (e.g., trust) had a relationship, paid or unpaid, with a foreign entity or foreign-based government?

**Yes**  **No**

**If yes,** attach a document with details. Attached

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**Co-PI Signature Date**