# University of Oregon Sponsored Projects Services Attachment B: Served in Management Role



#### **Entity Detail**

1.	Entity Name:					
2.	Please describe the business of this entity in detail:					
3.	Who has inter	est in this e	entity?			
	Self	Spou	se	Domestic Partner	Dependent Child	
4.	Is this a for-pro	ofit or non-	profit entity?			
	Profit		Non-profit			
5.	. Is this entity publicly traded or privately held?					
	Publicly 1	Traded	Privately He	ld		
6.	What is your/y	our spouse	e's/your domes	tic partner's/ your depen	dent child's title at this entity?	
7.	What is your/y	our spouse	e's/your domes	tic partner's/ your depen	dent child's role at this entity?	
8.	What is the va	alue of any	remuneration (	e.g., salary, consulting f	ees, honoraria or any other	
-	ayments) made nildren?	by this en	tity to you, you	r spouse, domestic partr	ner or dependent child/	
01	maion.					

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#### **Entity Relationship Detail**

1. Does this entity so or in any other way?	upport your sub-agreement related research through grants, contracts, gifts
Yes	No
If yes, please pro the project(s).	ovide specific details including the method of support and a description of
<ol><li>Does any of your</li><li>Yes</li></ol>	sub-agreement related research have the potential to benefit the entity?
	ovide specific details including a description of the project(s) and how it
3. Does this entity re Subjects?	elate to any of your sub-agreement related research involving Human
Yes	No
If yes, please probenefits from the	ovide specific details including a description of the project(s) and how it entity.
4. Do you conduct so compound of this en	ub-agreement related research involving a device, program, method or tity?
Yes	No
If yes, please provid from the entity.	e specific details including a description of the project(s) and how it benefits

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5. Do you conduct s compound of this en	sub-agreement related research involving a device, program, method or ntity's competitors?
Yes	No
If yes, please pr benefits from the	rovide specific details including a description of the project(s) and how it e entity.
6. Do you make ded entity?	cisions/requests to purchase goods and services that may be related to this
Yes	No
• •	escribe in detail including the type of goods/services purchased, who uses rices, and how these goods/services are used.
	nstitutions only, do you have any students you advise or you serve on their committees who are employed by or conduct any work for this entity?
Yes	No
If yes, please pr	ovideÁs@^Ánc`å^}o©Ánæ{^Áæn}åÁæn}][ājq{^}oÁs}]^Ás\$}å^¦*¦æå`ææ^£Ät¦æå`ææ^£Ánœ&ÈE
	nstitutions only, do you have any students you advise or you serve on their committees who are conducting research that has the potential to benefit
Yes	No
If yes, please pr	ovideÁs@^Ánc`å^}o©Á,æ(^Áæ)åÁæ)][ājq(^}oÁs]^ÁsÇ}å^¦*¦æå`æe^Én\æå`æe^Én\æ&ÈEn&ÈÈn
•	conduct activities that relate to your research, administrative, clinical, and stitutional Responsibilities at the sub-recipient organization?
Yes	No
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