

CALIFORNIA STATE UNIVERSITY LONG BEACH (CSULB)

DISCLOSURE SUPPLEMENT (Non PHS)

This form is to be completed by all Principal Investigators and other Investigators who have reported a financial interest on Federal Disclosure Form. Completion of this form is required in accordance with CSULB Executive Order. The information provided herein may be released or transmitted to the sponsor upon request, and per the California Public Records Act, may also be released to the public upon request.

Name of Investigator:

Title of Research Project:

Project Role and Responsibilities:

Name of Entity in which you have a financial interest: _____

1. Do you hold a management position such as board member, director, officer, or other position of responsibility? Yes No

6. Will you be supervising or assigning students, postdoctoral fellows, or other trainees on this project?

No Yes If yes, please answer A - C below:

A. Please describe their participation or assignment:

B. Please explain the training or supervision you will provide to the trainees (if applicable):

(Please print name and title of the trainee(s) in the space provided.)