

Republic of the Philippines Department of Health

SINGLE JOINT RESEARCH ETHICS BOARD

SJREB FORM A DECLARATION OF CONFLICT OF INTEREST

al								
e:								
Declaration of Conflict of Interest								
Are you an employee of the sponsor/s?			Yes		No			
Have you done consultancy or part time work for the sponsor/s in the past?			Yes		No			
In the past year, did you receive P500,000 or more from the sponsor/s?			Yes		No			
	Other inf	ormatio	n					
Do you have other financial or non-financial ties with the sponsor (e.g. employment of relative to the 4th level of consanguinity)								
Are you a member of a policy- determining/recommendatory body that is convened by the DOH, DOST, and other national agencies who lead on COVID-19 response?								
List of all studies you are currently managing								
Sponsor	Study Site		(if ongoing implementation,		% of time allotted for the study			
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Ethical Responsibility and COI Statement

I hereby pledge to address all forms of COI that I may have and perform my tasks objectively, protect the scientific integrity of the study, protect all human participants and comply with my ethical responsibilities as Coordinating Investigator (CI)

SIGNATURE	DATE