CALIFORNIA STATE UNIVERSITY LONG BEACH (CSULB)

		DISCLOSURE SUPPLEMENT (PHS)							
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		Name of Investigator:							
		Title of Research Project:							
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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 whether the direct participation of students, postdoctoral fellows or other trainees in the research being supported or in any related consulting activities would hinder their ability to report or publish for academic (including thesis or dissertation) purposes.	
	C. Will the students, postdoctoral fellows or other trainees participate in any consulting or other relationship with the entity listed above, either independently or as an assistant to you?	
	No Yes If yes, please describe:	
	Do you own or have any other financial interest in an entity that is proposed as a subcontractor, consortium member, or lessor, or is otherwise involved in the project? Please describe the relationship.	
8.	Do you receive reimbursed or sponsored travel related to your Institutional responsibilities? This do not include travel that is reimbursed or sponsored by a federal, state, or local government agency, ar institution of higher education, academic teaching hospital, medical center, or research institute affiliated with an Institution of higher education.	
9.	If you reported a signifi9 (e)-1.3 efi(f)1.1 (u (ig)15.9 J 0 Tc 0 Tw 2.0.62 0 Td (o)Tj -0.011 Tf	-2Tw 2.0.6250.9