



Western Michigan University Conflict Avoidance Statement

Name

College or Unit

Department

Company

Licensed Technology

Because of the WMU license granted to the above company and my equity* position and continuing relationship with this company, I acknowledge the potential for a possible conflict of interest between the performance of research at WMU and my contractual or other obligations to this company. Therefore, I will not without proper authorization:

1. use students at WMU for research and development projects for the company;
2. restrict or delay access to information from my WMU research;
3. take direct or indirect research support from the company in order to support my activities at WMU;
or
4. employ students at the company, except in accordance with WMU policies and procedures.

In addition, in order to avoid the appearance of a conflict, I will attempt to differentiate clearly between the intellectual directions of my WMU research and my contributions to the company. To that end, I will expressly inform my department chair/laboratory director annually of the general nature of my activities on behalf of the company.

Signed

Date

Name of Approver

Approver Signature (Department Chair or Unit Director)

Date

* "Equity" includes stock, options, warrants or other financial instruments convertible into Equity, which are directly or indirectly controlled by the inventor.

Return completed form to the [ORI Research Program Officer](#) for your department.