Northeastern IPM Center – IPM Partnership Grant Program
Conflict of Interest List

For each Project Director (PD) and Co-PD, list alphabetically (by last name), the full names of collaborative partners. Mark each category that applies with an "X". Additional pages may be used as necessary. Please restrict your list to only the past three years where indicated; including outdated collaborations could hinder the review of your proposal. Other individuals working in the applicant's specific area are not in conflict of interest with the applicant unless those individuals fall within one of the listed categories.

- All co-authors on publications within the **past three years**, including pending publications and submissions.
- All collaborators on projects within the **past three years**, including current and planned collaborations.
- All thesis or postdoctoral advisees/advisors **for all years**.
- All persons in your field with whom you have had a consulting/financial arrangement/other conflict-of-interest in the **past three years**.

Name of Project Director or Co-PD submitting this form: _____.

CONFLICT NAME (LAST, FIRST)	CO-AUTHOR	COLLABORATOR	ADVISEE/ ADVISOR	OTHER – Please Specify

Adapted from Form CSREES 2007, 8/2014