

DECLARATION OF RESEARCH INDEPENDENCE

The Data Stewardship Committee requires this declaration prior to releasing information to the Principal Investigator for the purpose of the Project entitled:

Once duly executed, this declaration will become part of the official project records.

I, _____, (print full name) am
_____ (role) for the Project, and hereby attest to the following:

- 1) I have not, nor will I receive funds or in-kind support for the Project from any for-profit organizations.**

- OR -

- 2) The following for-profit organizations have provided or will provide funds or in-kind support the Project.** *Note: all for-profit organization funds provided directly, indirectly, or through a third party (such as an industry-funded patient group) must be included.*

Organization Name	Amount	Contract Reference Number

- a) No member of the research team for the Project is currently an employee of, or individual contractor to, any of the for-profit organizations enumerated in paragraph 2.
- b) No employee or individual contractor of any for-profit organization enumerated in paragraph 2 will:
- i. have access to record-level data pertaining to individual patients or providers provided by the Province in de-identified form for the purposes of the Project;
 - ii. contribute to, or otherwise influence, the development of research methodology, analyses, reports, presentations, and other materials for publication; or
 - iii. have the ability to suppress the publication of research findings.
- c) Copies of any contracts, memoranda of understanding, or other instruments executed to describe the terms and conditions related to the funding described in paragraph 2 have been provided to the Province. (The Principal Investigator or delegated research coordinator may submit these materials prior to, or together with, this declaration.)

I will immediately submit an amended and restated declaration to the Province if there is a change in circumstances that affects the accuracy or completeness of this declaration.

Signature

Name:

Date:

Organization:

PI

Team Member