***Japanese Journal of Leprosy:* CONFLICT OF INTEREST NOTIFICATION FORM**

(**To be signed by each author**––photocopies accepted)

It is the responsibility of all authors to disclose all financial and private affiliationsthat could pose a conflict of interest. Potential conflict of interest shall exist where an author has a financial interest in an entity that may derive financial benefit (or detriment) as a result of the deliberations set out in or the conclusions drawn from the work. Such financial interest may be either direct (as where an author is a shareholder\*, officer, trustee, employee or consultant of or is a recipient of funds for research, fellowship, travel grants, fees for speaking in public, fees for consulting or funds for a staff member from such an entity) or indirect (where an author is the spouse, de facto partner, child or parent of another person or persons so affiliated). This does not include blind shares such as unit trusts or superannuation schemes where sale or purchase of shares is not under the control of the owner of the shares. Information provided will be treated as strictly confidential and will not influence the review process but if the manuscript is accepted for publication, the editor reserves the right to determine how such information is to be disclosed and to publish information about conflict of interest provided by authors when deemed important for readers in evaluating the material presented in the manuscript.

**Please answer all the following questions.**

**Provide additional details, where necessary, in the accompanying letter.**

**1. (i) Have you accepted from a sponsor, pharmaceutical company or other organization  
 (circle Yes or No as appropriate)**

* Funds for research?...................................................................................................................... ..........**Yes / No**
* Consultancy fee or commission fee?.....................................................................................**Yes / No**
* A fellowship, research grant or education grant?.......................................................................................**Yes / No**.
* Fees for speaking in public, institutions etc.? ………………………………………………………………………………..……..**Yes / No**
* Conference registration fees and/or travel or accommodation expenses? ………………………………….**Yes / No**
* Funds for a staff member? ………………………………………………………………………………………..**Yes / No**

**(ii) Do you hold any stock or shares in any entity that may derive potential financial benefit (or detriment) as a result of the deliberations set out in or the conclusions of the study (circle Yes or No as appropriate)**

* Directly?....................................................................................................................................................**Yes / No**
* Indirectly, via a spouse, de facto partner, child or parent?....................................................................... **Yes / No**

**2. Have potential conflicts of interest, (if present) been disclosed to the study participants?**..........**Yes / No**

**3. With respect to a funded/sponsored study, has the funding source participated in  
 (circle Yes or No as appropriate)**

* Study design?...........................................................................................................................................**Yes / No**
* Collection, analysis and interpretation of the data?...................................................................................**Yes / No**
* Writing of the report?.................................................................................................................................**Yes / No**
* Decision to submit report for publication? …………………………………………………………………..…**Yes / No**

**4. As an author (circle Yes or No as appropriate)**

* Did you have full access to all data in this study?......................................................................................**Yes / No**
* Are you prepared to take full responsibility for its accuracy?.....................................................................**Yes / No**

**5. If none of the above apply and there is no conflict of interest please clearly state this in the manuscript.** I certify that there are no financial or personal relationships between myself and others that could bias the work set out.

Name/ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date