



Disclose of Potential Conflict of Interest and Commitment

It is the policy of the University of Arkansas System that its officers, faculty, staff and others acting on its behalf have the obligation to avoid ethical, legal, financial and other conflicts of interest with their obligations to the University or its welfare. In adherence to the System’s policy, please complete the following statement to disclose any relationships or activities which might give rise to conflicts, or the appearance thereof, with your duties, responsibilities or obligations to the University of Arkansas System and it's member institutions.

All faculty, non-classified and classified staff are required to complete this form annually or more often as needed.

I have read the policy on conflict of interest and commitment, and I disclose the attached explanation of the nature of each potential conflict of interest or appearance thereof in compliance with that policy.

I have read the policy on conflict of interest and commitment, and I have no conflicts of interest to disclose.

Note: The information disclosed to the University of Arkansas System and it's member institutions may be subject to public disclosure. To request that specific information be reviewed to determine if it is exempt, attach all the information required.

In signing this disclosure, the employee acknowledges that all information not determined to be exempt may be released by the U of A System office upon public request, without further notice.

Signed _____ Date _____

Name (print or type) _____

Title or Position _____

Employee ID # _____

Department or Unit _____

Administrative Review

No conflict exists Conflict exists –needs further review Unacceptable conflict

Department Chair or Unit Head _____ Date _____

No conflict exists Conflict exists –needs further review Unacceptable conflict

Department Chair or Unit Head _____ Date _____

No conflict exists Needs CICRC review Conflict exists–Expedited review Unacceptable conflict

Department Chair or Unit Head _____ Date _____