



## Professional Service Contracts with Independent Contractors Conflict of Interest Disclosure Form

Contractor's Name		Type of Business
Address		Phone #
City		Fax #
State	Zip Code	Email

**Employee Whom Conflict may arrive**  
**Leave Blank if there is no individual and check 2a then sign below**

Name:	Department:
Position:	Phone #: Email Address:

### *Contractor's Statement of*

#### **Certification**

By signing below I hereby certify:

1. I have read and understand MVSU Policy: Conflict of Interest and Financial Disclosure Policy, and MVSU Policy: Faculty Consulting Policy. If applicable, I have also read and understand MVSU Policy: Compensated/Uncompensated Professional Activities Outside the University (Administrators & Other Contract Professionals),
2. I have (check the box that applies):
  - a. No relationships or financial interests that are or might reasonably be perceived to be in conflict with my duties as a Contractor at MVSU. (If you check this box, you may skip the rest of this form; please sign below and return.
  - b. Potential conflicts of interest not previously disclosed as described in the Disclosure Statement below.
  - c. A potential conflict of interest which has been duly disclosed previously and there has been no change which requires an updated disclosure.

#### **Disclosure Statement**

1. I, my spouse (or domestic partner) and/or my dependent children have the following interests or relationships with said employee (check all applicable):

## University Employee Statement of Interest

A Significant Financial Interest in an entity engaged in commercial or research activities directly related to my MVSU duties as follows:

Salary or other payment for services (e.g., consulting fees or honoraria) >\$10,000 annually.

Ownership interest (e.g. stock, stock options, partnership interest, or other) >5% ownership and > \$10,000 in value.

Intellectual property rights (e.g., patents, copyrights, and royalties from such rights) arising from the use of University resources.

Hold a position of executive, officer, or director in a business engaged in commercial or research activities directly related to my MVSU responsibilities.

2. In my position at MVSU, I have responsibility for decisions which may result in direct benefits or detriments to:

A relative as defined in MVSU's Nepotism Policy (child, parent, grandparent, great-grandparent, grandchild, great-grandchild, brother, sister, aunt, uncle, niece, nephew or cousin, by blood relationship; spouse, or brother, sister, parent, or child of spouse; or spouse of one's brother, sister, parent or child).

A person with whom I (or my Spouse (or Domestic Partner) or Dependent Children) have a financial interest with this company.

3. I participate as an employee, officer, board member, or owner in an entity which has (or wishes to have) rights to intellectual property for which I was an inventor or creator in my work for MVSU.

4. Other potential conflict of interest (provide brief explanation) Further I agree:
- To update this disclosure on an annual basis and any time new reportable significant financial interests are obtained.
  - To cooperate in the development of a Conflict Management Plan, if determined necessary by the University.
  - To comply with any conditions or restrictions imposed by the University to manage, reduce, or eliminate actual or potential conflicts of interest.

Employee's Sign: \_\_\_\_\_  
Only if applicable

Business Owner Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Employee's Note: