



Office of Human Resources

2200 Bonforte BLVD.
PUEBLO, COLORADO 81001-4901
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CONFLICT OF INTEREST POLICY – DISCLOSURE FORM

It is a policy of the Colorado State University – Pueblo’s governing board, the Board of Governors, that all employees be required to submit a disclosure form describing the particulars of potential conflicts of interest

Respondent	
Name _____	Job Title or Position _____
Please print or type	
<i>I understand that I must indicate any and all activities or projects currently in progress or planned, which have the Potential for interpretation as a conflict of interest. (Check below as appropriate):</i>	
<input type="checkbox"/> <i>A memorandum indicating particulars of activities or projects is attached</i>	<input type="checkbox"/> <i>I have nothing to disclose</i>
<input type="checkbox"/> <i>I believe I am in compliance with this policy</i>	
_____	_____
Signature (respondent)	Date

I have reviewed the information (if any) provided by the respondent and attached to this document, and in my opinion:

<input type="checkbox"/> <i>No conflict of interest exists</i>	<input type="checkbox"/> <i>A potential conflict may exist; and</i>
<input type="checkbox"/> <i>I have outlined a recommended action (see attached) which will eliminate that potential</i>	
_____	_____
Immediate Supervisor/Department Chair	Date

<input type="checkbox"/> <i>No conflict of interest exists</i>
<input type="checkbox"/> <i>I concur with the recommended action as submitted by the supervisor/department chair</i>
<input type="checkbox"/> <i>A written agreement with the respondent is attached which, I believe, will eliminate and avoid and conflict.</i>
<input type="checkbox"/> <i>An agreement with the respondent has not been reached. The issue is referred to the Appointing Authority.</i>

Dean or Director
Date

<input type="checkbox"/> <i>No conflict of interest exists</i>
<input type="checkbox"/> <i>The attached agreement with the respondent is accepted. Information filed</i>
<input type="checkbox"/> <i>A written decision is appended and a copy submitted to the respondent</i>

Appointing Authority
Date