

**SECOORA Members' and Member Representatives'  
Annual Conflict of Interest Statement**

Name: \_\_\_\_\_

Title / Position: \_\_\_\_\_

Employer: \_\_\_\_\_

I affirm the following, on behalf of myself and the Member I represent:

- I have received a copy of the SECOORA Conflicts of Interest Policy. \_\_\_\_\_  
(initial)
- I have read and understand the policy. \_\_\_\_\_ (initial)
- I and the Member institution I represent agree to comply with the policy.  
\_\_\_\_\_ (initial)
- I have disclosed all Disclosable Interests that existed on or before the date of this  
statement. \_\_\_\_\_ (initial)

**Disclosures:**

1. Do you or the Member you represent, directly or indirectly, through personal, business, investment, family or domestic partner, have:
  - a. An ownership or investment interest in any entity with which SECOORA has a transaction or arrangement? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
  - b. A compensation arrangement with SECOORA or with any entity or individual with which SECOORA has a transaction or arrangement (including employment)? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
  - c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which SECOORA contemplates negotiating a transaction or arrangement? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
  - d. Involvement in any project sponsored or supported by SECOORA, including but not limited to:
    - (1) applying for, or preparing any proposal for, any award or contract from SECOORA, on behalf of yourself or any organization with which you are affiliated; and
    - (2) evaluating any application or proposal with respect to which any organization with which you are affiliated has submitted, or is considering submitting, to SECOORA?If yes, explain: \_\_\_\_\_

e. Involvement on behalf of any entity in the preparation of any proposal, bid or application for any contract or grant in competition with SECOORA?  
If yes, explain: \_\_\_\_\_

2. Does your institution hold a subcontract or cooperative agreement directly from SECOORA? If yes, please describe: \_\_\_\_\_
3. Does your institution hold a subcontract or cooperative agreement from another institution that has a subcontract or cooperative agreement from SECOORA? If yes, please describe: If yes, please describe: \_\_\_\_\_
4. Do you hold any professional, business or volunteer positions or responsibilities that could give rise to conflicts of interest with your positions as a SECOORA member? If yes, please describe: \_\_\_\_\_

Signature: \_\_\_\_\_

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

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