SECOORA Members’ and Member Representatives’
Annual Conflict of Interest Statement

Name: ________________________________________________

Title / Position: ________________________________________

Employer: _____________________________________________

NOTE: As of January 2019, anyone who wishes to be a member of the SECOORA board shall be ineligible to receive or apply for SECOORA funding for science and/or educational-outreach investigations, other than reimbursement for travel for acting on behalf of SECOORA, effective July 1, 2019.

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: ________________________________