**
Conflict of Interest Board Disclosure Form**

This form is used to document an incident of actual or perceived conflict of interest. Please refer to the CDSS Conflict of Interest Policy prior to completing the form. All Directors must complete this form at their Board orientation. Board members are required to complete the form on an annual basis, or as any incident presents itself throughout the year.

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| **Section 1 – Personal Information** |
| Name: | Board Appointment Date: |
| Board of Director |  |
| **Section 2 – Type of conflict of interest** |
| I declare a(n): (circle one)  |
| * Actual conflict Perceived conflict No conflict
 |
| **Section 3 – Conflict of interest details** |
| Please provide details as to the nature of the conflict of interest: |
| **Section 4 – Nepotism** |
| Please provide details as to the nature of the conflict of interest, in regards to nepotism: |
| **Section 5 – Proposed management of the conflict of interest** |
| How do you plan to remediate the conflict of interest?**Section 6 – Board Chair Review** |
| Decision: (circle one)Approved Not Approved |
| Comments |
| Name: | Signature: |
| Date: |