

COLLEGE OF EASTERN UTAH

Conflict of Interest  
**Confidential Disclosure Form**

|   |  |
|---|--|
| Faculty/Staff Name  |  |
| Department/Unit   |  |
| Reporting Period  |  |
| If reporting for an immediate family member, give their name and relationship   |  |
| Enterprise/Corporation (name and complete address)  |  |
| Principle business of Enterprise/Corporation  |  |
| Provide a discussion of the actions or safeguards you will take to prevent your activities from affecting your objectivity as a college employee or will otherwise protect college interests: |  |
| Type of Board, Board Committee, Executive Position, or other employed relationship held by you or your immediate family member:   |  |

Describe the responsibilities of this employed relationship:

Describe the college activities funded by this enterprise/corporation in which you are a participant:

Specify the type of funding, gifts, gratuities, consulting fees, royalties or other compensation (direct or deferred) received by you or your immediate family member (other than occasional meals, complementary copies of textbooks, etc.) From the enterprise/corporation during the last 12 months:

I certify that all of the above information is correct and that I will promptly update information as changes occur.

Employee Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Reviewed by:

Department Chair Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Approved by:

Vice President of Financial Services: \_\_\_\_\_  
Date: \_\_\_\_\_

Attach any supportive documents that may be necessary to evaluate the disclosure.

Return this form to the Office of the Vice President of Financial Services