



Notre Dame De Namur University
Conflict of Interest Policy Acknowledgement/Disclosure Form

I have received, read, understand, and are held accountable for the following:
The Notre Dame De Namur University Conflict of Interest Policy.

Do you or does any member of your family (as defined above) have a business relationship (as defined above) with a person, firm, corporation, or business that does business with Notre Dame de Namur University or that you anticipate will probably do business with Notre Dame de Namur University during your tenure as an Officer or Key Employee or within one (1) year thereafter?

Yes _____ No _____

If yes, please give the details of each such business relationship and estimate the actual or potential financial benefits that may accrue to you and your family members.

Did you or a member of your family (as defined above) receive, during the past twenty-four (24) months, any gifts or loans from any person, firm, corporation or business that does business with Notre Dame de Namur University?

Yes _____ No _____

If yes, please give details of each such gift or loan including its source and approximate value.

Do you agree to abide by the conflict of interest policy, as delineated in the 2003 Employee Handbook for Administrators and Staff?

Yes _____ No _____

I declare under penalty of perjury that the foregoing information is true, correct, and complete to the best of my knowledge and that this declaration was signed at _____, California on _____.

Signature _____

Printed Name _____ Date _____