



Eastern Illinois University
 Department of Procurement,
 Disbursements & Contract Services
 1135 Old Main
 600 Lincoln Avenue
 Charleston, IL 61920

CONFLICT OF INTEREST DISCLOSURE

EMPLOYEE NAME: _____

POSITION TITLE: _____

Please answer “yes” or “no” to each of the following questions. If you answer “yes” to any of the following questions, please provide further explanation in the space below or use the reverse side if necessary.

- | | | |
|---|--------------|-------------|
| 1. Are you an officer, director, partner, member, or employee of any firm or corporation with whom Eastern Illinois University has business dealings? | Yes
_____ | No
_____ |
| 2. Do you or does a member of your family* have a financial interest in, or receive any remuneration or income from, any business organization or firm with which Eastern Illinois University has business dealings, or are you the beneficiary of a trust that receives such remuneration or income? | Yes
_____ | No
_____ |
| 3. Did you or any member of your family* receive, during the past twelve months, any gifts, loans, or benefits from any source from which Eastern Illinois University has business dealings, or are you the beneficiary of a trust that receives such gifts, loans, or benefits? | Yes
_____ | No
_____ |
| 4. Are there other potential conflicts not listed above? If so, please describe. | Yes
_____ | No
_____ |

* “Family” includes spouse, father, mother, son, daughter, brother, sister, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law.

This form must be renewed annually.

I certify that the information contained in this document is true and complete to the best of my knowledge.

Employee Signature

Date