CONFLICT OF INTEREST DISCLOSURE STATEMENT

This form is to be used for the following purposes:

1. For annual disclosures to be submitted by October 1 of each year.
2. For disclosures of potential Conflicts of Interest whenever they occur.

Submit your completed form to the Director of Human Resources, who will provide a copy to your Cabinet-level supervisor.

For questions concerning the information required by this form, or any definitions, refer to MSU-Northern Conflict of Interest Policy 1003.6 or ask the Director of Human Resources.

CERTIFICATION

By signing below, I hereby certify:

1. I have read and understand the MSU-Northern Policy No. 1003.6, Conflict of Interest; and
2. I have [check the box which applies]
   a. ___ No relationships, contractual commitments, or financial interests that are or might reasonably be perceived to be in conflict with my duties and responsibilities at MSU-Northern;
   b. ___ A potential conflict of interest which has been duly disclosed previously and there has been no change which requires an updated disclosure; or
   c. ___ Potential conflicts of interest not previously disclosed as described below in the Disclosure Statement.

DISCLOSURES

Complete this section only if you have checked 2c above. If you checked 2a or 2b, you should sign the bottom of the form, date it, and submit it to the Director of Human Resources and provide a copy to you immediate supervisor.

1. ___ I, my spouse and/or dependent child(ren) have the following interests or relationships (check all applicable):
a. ___ A Significant Financial Interest in a non-Campus entity/enterprise directly related to my duties as follows:
   ___ Salary or payment for services (e.g., employment, consulting fees/honoraria)
   ___ Ownership interest (e.g., stock, stock options, partnership interest or other)
   ___ Intellectual property rights (e.g., patents, copyrights or royalties)

b. ___ Hold a position of ___ executive, ___ officer, or ___ director in an entity engaged in commercial activities directly related to my MSU-Northern responsibilities.

c. ___ Other potential Conflict of Interest.

2. ___ In my position at MSU-Northern, I have responsibility for decisions which may result in direct benefits or detriments to:
   a. ___ A relative as defined in MSU-Northern’s Nepotism Policy (parent, grandparent, great-grandparent, child, grandchild, great-grandchild, brother, sister, aunt, uncle, niece, nephew, or cousin, by blood relationship; spouse; or brother, sister, parent or child of spouse; or spouse of one’s brother, sister, parent or child).
   b. ___ A person in whom or with whom I (or my Spouse or Dependent Children) have a financial interest.
   c. ___ A person with whom I have a romantic relationship.

3. ___ I participate as an employee, officer, board member, or owner in an entity which has (or wished to have) rights to intellectual property for which I was an inventor or creator in my work for MSU-Northern.

With regard to the above-disclosed interests, attach a written explanation including the name of the entity or person, the nature and extent of the interest or relationship, and any other information necessary to an understanding of the potential Conflict of Interest.

The information contained in this form is complete and accurate to the best of my knowledge, and I acknowledge my continuing obligation to update my disclosure when there is a significant change in my personal or financial interests creating potential Conflicts of Interest.

Signed: ____________________________________________ Date: ______________________

Printed Name: _________________________________________________________________