Delaware State University

University Area(s) Responsible: Office of Human Resources

Policy Number & Name: 1-03: Trustee, Officer or Key Employee Conflict of Interest Policy

Approval Date: 1/19/12

Revisions: _________________________

Related Policies & Procedures: ________________

Policy Statement

No trustee, officer or key employee shall use his or her position, or the knowledge gained there from, in such a manner that creates a conflict between the interest of Delaware State University or any of its affiliates and his or her personal interest.

This conflict of interest policy is applicable to all trustees, officers and key employees. It is also applicable to certain family and business relationships of the trustees, officers and key employees.

For purposes of this conflict of interest policy, family and business relationships are defined as follows:

- Family relationships include an individual’s spouse, children, grandchildren, great grandchildren, siblings (whether by whole or half blood), and the spouses of children, grandchildren, great-grandchildren, and siblings.
Business relationships are employment and contractual relationships, and common ownership of a business where any officers, directors, or trustees, individually or together, possess more than a 35% ownership interest in common. Ownership is voting power in a corporation, profits interest in a partnership, or beneficial interest in a trust.

Disclosure

To implement this statement, trustees and officers of Delaware State University will submit annual reports on the attached form and shall make disclosure prior to any Board or Committee action, if not previously disclosed.

These reports will be reviewed by the Executive Committee which shall attempt to resolve any actual or potential conflict(s) and in the absence of resolution refer the matter to the Board of Trustees.

In addition, the information provided will assist Delaware State University in complying with the Internal Revenue Service’s tax return disclosure requirements.
Potential Conflict(s) of Interest Statement

I have read the Policy Statement of Delaware State University regarding Conflicts of Interests.

To the best of my knowledge and belief, except as disclosed herewith, neither I nor any person with whom I have or had a personal or business relationship is engaged in any transaction or activity, or have any relationship which may represent a potential competing or conflicting interest, as defined in the Policy Statement.

And further, to the best of my knowledge and belief, except as disclosed herewith, neither I nor any person with whom I have or had a personal or business or compensated professional relationship intend to engage in any transaction, to acquire any interest in any organization or entity, to become the recipient of any gifts or favors which are substantial in nature or to become involved in any activity which might be covered by the Policy Statement of Delaware State University regarding Conflicts of Interests.

(A) Without Exception (                      )

(B) Except as disclosed in the attached statement (                      )

___________________  __________________________________
Date                     Signature
1. Did any of your family members or business interests (as defined in the Delaware State University Conflict of Interest Policy) have any employment or contractual relationship with the University?

Yes ____  No ____

If you answered “yes”, please explain:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

2. Did you receive compensation of $50,000 or more from any other organization, whether tax-exempt or taxable, that may have one of the following relationships with Delaware State University? Note that the $50,000 compensation is determined in the aggregate for the relationships noted in (a) through (c) below.

___ Yes  ___ No

If you answered “yes”, please supply the following information:

A. Name of the organization(s) in which such interest is held and the person(s) by whom such interest is held:

1. ______________________________________
2. ______________________________________

B. The nature and amount of each financial interest, remuneration, or income:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Relationship Type  Yes  No

(a) Compensation received from a University affiliate.  ____  ____
If you answered “yes”, please explain:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

(b) Compensation from an organization that conducts joint programs or shares facilities or employees with the University or its affiliates.

Yes  No

If you answered “yes”, please explain:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

(c) Compensation received from an organization (tax-exempt or taxable) in which you exercise substantial influence or authority (i.e. Board Trustee).

Yes  No

If you answered “yes”, please explain and indicate whether the organization in which you have substantial influence, has any business dealings with Delaware State University or its affiliates.

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

______________________________________  ___________________

Signature                  Date