



**CONFLICT OF INTEREST DISCLOSURE FORM
FOR SFPE FOUNDATION
CONTRACTORS & GRANT RECIPIENTS**

Last Revised: October 12, 2021

In accordance with the SFPE Foundation’s Conflict of Interest Policy, adopted by the Board of Governors on September 14, 2021, all respondents to requests for proposals must complete this disclosure form and include it with their proposal materials. Where a team of individuals applies for Foundation funding, all members of the team who will benefit from the Foundation’s support must complete this form. This form does not count towards any page limits or word counts described under a particular funding call. Please note that replying “Yes” to any of the questions below does not necessarily disqualify a given applicant for Foundation funding. Disclosures will be reviewed with each proposal to determine whether a relationship is inappropriate.

Contact the Foundation Director with any questions at foundation@sfpe.org.

Full name: _____

Title: _____

Organization: _____

Date: _____

1. Do you serve in the capacity of Owner, Senior Executive Leadership (e.g., c-suite positions), Board Member, or other central leadership role within a company, organization, contractor, or other entity that may be impacted in any way by the results of the project for which you are seeking funding from the Foundation?

Yes No

If “Yes,” please list the names of the organizations to which you belong, the office/role held, and describe the nature of the potential impact of this project:

Click or tap here to enter text.

2. Do you, or any member of your immediate family, have a financial or other interest in, or receive any remuneration or income from, any business or organization that may be impacted in any way by the results of the project for which you are seeking funding from the Foundation?

Yes No

If “Yes,” please list the names of the businesses or organizations in which such an interest is held, the person(s) who holds that interest, and describe the nature and amount of any such financial interest, remuneration, income, or other related benefit:



Click or tap here to enter text.

3. Over the past year, did you or any member of your immediate family receive any gifts, loans, or other forms of remuneration or benefit from any business or organization that may be impacted by the results of the project for which you are seeking funding from the Foundation?

Yes No

If "Yes," please list the names of the businesses or organizations, the person(s) who benefitted, and describe the nature of the benefit:

Click or tap here to enter text.

4. Do you, or any member of your immediate family, have a relationship of any kind with any member of the Foundation's staff or Board of Governors?

Yes No

If "Yes," please name the person(s) with whom the relationship exists and explain its nature:

Click or tap here to enter text.

5. Over the past year, have you (or any member of your immediate family) been involved in any other activities or maintained any relationships that could be interpreted as a possible Conflict of Interest with respect to your duties as a contractor or grant recipient of the Foundation?

Yes No

If "Yes," please describe below:

Click or tap here to enter text.

I certify that all the information supplied in this form is true and complete to the best of my knowledge.

Signature: _____

Date: _____