Vendor Conflict of Interest Disclosure Form

All vendors interested in conducting business with Alliance College-Ready Public Schools and Affiliated Schools must complete and return the Vendor Conflict of Interest Disclosure Form in order to be eligible to be awarded a contract. Please note that all vendors are subject to comply with Alliance and Affiliated School’s conflict interest policies as stated within the certification section below.

If a vendor has a relationship with an Alliance or Affiliated Schools official or employee or an immediate family member of an Alliance or Affiliated Schools official or employee, the vendor shall disclose the information required below.

Certification: I hereby certify that to my knowledge, there is no conflict of interest involving the vendor named below:

1. No Alliance or Affiliated Schools official or employee or Alliance College Ready Public School and Affiliated Schools employee’s immediate family member has an ownership interest in vendor’s company or is deriving personal financial gain from this contract.
2. No Alliance or Affiliated Schools official or employee’s immediate family member has an ownership interest in vendor’s company or is deriving personal financial gain from this contract.
3. No retired or separated Alliance or Affiliated Schools official or employee who has been retired or separated from the organization for less than one (1) year has an ownership interest in vendor’s company.
4. No Alliance or Affiliated Schools official or employee is contemporaneously employed or prospectively to be employed with the vendor.
5. Vendor hereby declares it has not and will not provide gifts or hospitality of any dollar value or any other gratuities to any Alliance or Affiliated Schools official or employee to obtain or maintain a contract.
6. Please note any exceptions below:

<table>
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<tr>
<th>Vendor Name</th>
<th>Vendor Phone Number</th>
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**Conflict of Interest Disclosure * **

Name of Alliance or Affiliated Schools official, employees or immediate family members with whom there may be a potential conflict of interest.

( ) Relationship to employee _________________________
( ) Interest in vendor’s company _________________________
( ) Other ____________________________________________

I certify that the information provided is true and correct by my signature below:

Signature of Vendor Authorized Representative

Date

Printed Name of Vendor Authorized Representative

Procurement Use Only

_____ Yes, named employee or official was involved in the procurement process or decision.
_____ No, named employee or official was not involved in the procurement process or decision.