

**NILES CITY SCHOOL DISTRICT
CONFLICT OF INTEREST
DISCLOSURE STATEMENT**

(Niles City School District ("Niles Schools") shall use its reasonable and diligent efforts to maintain the confidentiality of all information provided in this statement.)

Name (please print) _____

Position with Niles Schools _____

I acknowledge that I have received, read, and understand the following policies pertaining to my employment status:

- Outside Activities of Administrators- Policy 1231
- Conflict of Interest – Administration - Policy 1130

I agree to comply with the aforementioned policies of Niles City School District.

I hereby disclose that I, or my immediate family [*spouse, child, mother, father, siblings and their spouses*], have the following relationships that may be a potential conflict of interest.

Please disclose any employment or financial interest which you or a member of your immediate family may have as either an officer, employee, or agent of any business organization which might give rise to a possible conflict of interest with Niles City Schools.

<u>NAME OF RELATIVE AND RELATION</u>	<u>NAME OF ORGANIZATION/POSITION HELD</u>
_____	_____
_____	_____
_____	_____
_____	_____

Affirmation

To the best of my knowledge, I have disclosed all potential conflicts of interest with regard to my decision-making role(s) in Niles City Schools. I will refrain from any votes or participation in any Board or committee action affecting these other interests.

REMINDER: If at any time there is a matter under consideration, which may constitute a direct or indirect conflict of interest, it is your obligation to disclose the facts to the Board, to abstain from voting and to refrain from using your personal influence in the matter.

Signature

Date