

## **Conflict of Interest Disclosure Form**

Required for all Roseman employees involved in procuring goods and services

## Complete this form to promptly disclose any real or potential conflict of interest with a proposed Vendor

The procurement of goods and services at Roseman University must be free of the undue influence of outside interests. There may be situations in which financial or other personal consideration may compromise, or have the appearance of compromising, an employee's professional judgement in the execution of any part of the procurement or contracting process. Any conflicts or potential conflicts of interest regarding the procurement or contracting Objectry mitigate the

| conflict of interest.  |                                    |
|--|------------------------------------|
| PART 1: EMPLOYEE INFORMATION   |                                    |
| Name: Unit: Phone:   | Email                              |
| Do you have any potential conflicts of interest with current procurement suppliers/vendors?  No Skip Parts 2 and 3 and Proceed to Part 4 to certify and sign.  Yes Complete Parts 2, 3 and 4.  |                                    |
| PART 2: TYPE OF PROCUREMENT  |                                    |
| Yes No Will this procurement involve federal funds? If yes, Grant Name:  |                                    |
| Will the procurement be made with: PCard Purchase Order Check Reque  | st Competitive Proposal Sealed Bid |
| Estimated value of procurement: Under \$10,000 \$10,001 - \$250,000 \$250,001 and above  |                                    |
| PART 3: NOTICE OF POTENTIAL OR REAL CONFLICT OF INTEREST   |                                    |
| Provide a description of your position/relationship with Roseman University (job title a   | and briefly describe duties)       |
| 2. Vendor name and what goods or services may be provided by this Vendor to the Univ   | versity?                           |
| 3. Explain your relationship to the vendor:  |                                    |
| 4. If you have ownership in the business, describe your involvement with the company, i  | including percent of ownership     |
| PART 4: APPROVALS  |                                    |
| I affirm that this discloses any conflict of interest to my knowledge and agree to take no part in the purchase recommendations or purchasing transactions. I affirm that the above is a full disclosure of possible conflicts of interest and that I will update my disclosure form promptly if relevant circumstances change. I am aware that a purchase from the above persons or entities without approval from the Procurement Department is considered a conflict of interest and may result in disciplinary actions.  Name  Signature  Date |                                    |
| - 3  |                                    |