Conflict of Interest Disclosure Statement

Personal Data

Name: _____

Current Employer/Business Affiliation, if applicable: _____

Position, if applicable: _____

Other Business Activities

Please disclose any other employment, business, or financial interest which you or a member of your immediate family may have as an officer, director, trustee, partner, employee, or agent which might give a rise to a possible conflict of interest with the PA Western CoC.

Charitable or Civic Involvement

Please disclose all official positions which you or any member of your immediate family may have as a director, trustee, or officer of any charitable, civic, or community organization as well as any unofficial roles such as significant donor, volunteer, advocate, or advisor which might give rise to a possible conflict of interest with the PA Western CoC.

Reminder: If at any time there is a matter under consideration that may constitute a direct or indirect conflict of interest not listed on this form, it is your obligation to disclose the facts to the board or committee.

I do hereby affirm that I have received and read the policy and I will adhere to the principles and practices set forth.

_____   _____

Signature   Date

Update of Contact Information

Work Information

Work Address: _____

Position: _____

Phone: _____

Email: _____

Home Information

Home Address: _____

_____

Home Phone: _____

Cell Phone: _____

Subcommittee Participation

As per our Governance Charter, all Board Members are required to participate in at least one CoC Committee. Please check the box next to the committee(s) you participate on. If you don't currently participate in a committee, please check the box next to "None" and then indicate which committee you would like to participate in. Somebody will be in touch with you shortly to provide information about upcoming meetings for that Committee.

☐ Executive Committee
☐ Funding Committee
☐ Governance Committee
☐ Coordinated Entry Committee
☐ DEIB (Diversity, Equity, Inclusion and Belonging) Committee
☐ Veterans Committee
☐ Reentry Committee
☐ DV Committee
☐ Advocates for Change
☐ YHDP Core Team
☐ None, but I would like to participate in

_____

(Please list the subcommittee(s) you would like to participate in)