



Conflict of Interest Agreement

Staff/Volunteer Name (please print): _____

I have read and understand The Gathering Place's Conflict of Interest Policy.

The standard of behavior at The Gathering Place is that all staff avoid conflicts of interest between the interests of The Gathering Place on one hand, and personal, professional, and business on the other. This includes avoiding potential and actual conflicts of interest, as well as perceptions of conflicts of interest.

I understand that the purposes of this policy are to protect the integrity of The Gathering Place's decision-making process, to enable our constituencies, including our funders, to have confidence in our integrity and representations of employees.

During the course of my employment, I will make a full, written disclosure of interests, relationships, and holdings that could potentially result in a conflict of interest. I will disclose any interests in a transaction or decision where I (including my business or other non-profit affiliation), my family and/or my significant other, employer, or close associates will receive a benefit or gain.. I agree to keep the written disclosure updated as is appropriate. After disclosure, I understand that I will be asked to leave the room for the discussion and will not be permitted to vote on the conflict in question.

I understand that this policy is meant to supplement good judgement, and I will respect its intentions.

Staff/Volunteer Signature: _____ Date: _____

Director of Human Resources: _____ Date: _____