

# Department of Defense

## Confidential Conflict-of-Interest Statement for DoD Advisory Committee Members

Name of Advisory Committee:

Member's name:

For each the following, please list home or work contact information:

Member's phone number:

Member's e-mail:

Member's address:

In carrying out your duties as a member of a DoD advisory committee, you will be called upon to give advice on DoD policy deliberations. We do not anticipate that you will ordinarily participate in any "particular matters." However, sometimes policy deliberations may focus on the interests of specific persons or organizations or on a discrete and identifiable class of persons or entities. In such cases, your personal financial interest or your affiliations or relationships with other affected persons or entities may raise conflict-of-interest questions. By providing the information requested on this form, you will satisfy a Federal regulatory requirement and help DoD personnel identify and resolve potential conflicts. Please return your completed statement to your Committee's Designated Federal Official prior to participating in Committee activity. For each of the three parts below, list all interests, positions, arrangements, or relationships that are responsive. If you have none, check the "NONE" box. If you have additional items to report, please include them on additional pages.

Part I: Financial Interests

**If NONE, please check this box: NONE [ ]**

**If you, your spouse, or your dependent children** receive any income (compensation, honoraria, royalties, etc.) from, or hold any stock, securities, or similar financial interests in any nongovernmental entity that either is the focus of, or is a member of a discrete and identifiable class that is the focus of, DoD policy deliberations likely to come before the Committee – list all such interests.

EXAMPLE: Report your spouse's stock in a company/contractor that could be affected by a finding/recommendation of the Advisory Committee.

(Identify specific entity, and the nature of the interest (salary, stock, bond, etc.)

1.

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3.

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8.

**Part 2: Positions and Arrangements** **If NONE, please check this box: NONE [ ]**

If any entity with which (i) you are now “connected”, (ii) you are negotiating to become “connected”, or (iii) you have an arrangement to become “connected” in the future is the focus of, or is a member of a discrete and identifiable class that is the focus of, DoD policy deliberations likely to come before the Committee – describe all such interests. **You are “connected” with any entity if you serve as an employee, officer, director, trustee, general partner, agent, attorney, consultant, or contractor for that entity.**

EXAMPLES: (1) Are you connected with a corporation, professional association, university, or national laboratory that has a direct grant, cooperative agreement or other financial relationship with DoD or parties that may be affected by recommendations of the Committee (*i.e.*, recommendation for current or future funding, closure of facilities, or selection of one type of research over another, etc.)? If so, name the entity and provide identifying information on the contract, grant, cooperative agreement, or other financial relationship involved. (2) Are you an officer in a professional association that has directly negotiated with the DoD on an issue the Committee is likely to discuss? If so, name the association and the issue involved.

(Identify specific organization, or entity)	(Type of position, arrangement or other connection)	(Interest or issue involved)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

**Part 3: Other Interests or Relationships** **If NONE, please check this box: NONE [ ]**

Are you aware of any other current or recent interests, affiliations, or relationships, including those of your relatives with whom you have a close personal relationship, that are either parties to or have interests that could be affected by, any policy deliberations likely to come before the Committee, or that you believe could impair your impartiality, or that could cause a reasonable person with knowledge of the relevant facts to question your impartiality? If so, describe all such interests.

EXAMPLE: Does your sibling's business stand to benefit by a change in DoD’s administration of the program on which your committee is advising? If so, briefly describe.

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If your designation as an advisory committee member gives you access to information not generally available to the public, you must not use that information for your personal benefit or make it available for the personal benefit of any other individual or organization. This is different from the entirely appropriate general benefit of learning more about DoD programs, learning from other advisory committee members, or becoming better acquainted with the state of a given discipline.

**COMMITTEE MEMBER'S CERTIFICATION**

I certify that my answers to the above questions are true and complete to the best of my knowledge. I also understand that I must contact the DoD Designated Federal Official responsible for the Committee if a conflict exists or arises during my term of service. I also will not divulge any classified or privileged information I may become aware of during my term.

Member's Name (Please Print)

Signature

Date

**CERTIFICATION BY RESPONSIBLE DOD OFFICIAL**

Based on my review of this form, I certify that:

- No conflicts identified.
- Waiver will be sought by separate document pursuant to 18 USC § 208 (b)(3) because the need for the individual's services outweighs the potential for a conflict of interest created by the financial interest involved.
- Other actions taken (explain).

Supervisor Signature

Date

Final Review Signature

Date

**Privacy Act Statement**

required by section (e)(3) of the Privacy Act

Title I of the Ethics in Government Act of 1978 (5 U.S.C. App.), Executive Order 12674, and 5 CFR Part 2634, Subpart I, of the Office of Government Ethics regulations require the reporting of this information before you may serve on a Federal advisory committee. The primary use of the information on this form is for review by officials of any agency, to determine compliance with applicable Federal conflict of interest laws and regulations. This confidential report will not be disclosed to any requesting person unless authorized by law. Failure to file this form will preclude your service on the advisory committee. Knowing and willful falsification of information required to be reported could subject you to criminal prosecution.