



## Confidential Conflict of Interest Disclosure Form

Employee's Name: \_\_\_\_\_ Dated: \_\_\_\_\_

Position: \_\_\_\_\_ Dept./Office \_\_\_\_\_

1. Please list all employment (including self employment) other than NJIT, you are (or expect to be) engaged in from the latter of commencement of hire at NJIT, or July 1, 20\_\_ through June 30, 20\_\_ . Describe the position (s), time expended and financial remuneration. If none, write "None".

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2. Please list all formal relationships (blood, business, legal, honorary) you hold with another employee/agent of NJIT or any person doing business with NJIT. Describe the relationship and the nature of the third party's involvement with NJIT (e.g., brother – employee in Financial Aid Dept., or landlord – brother of PSA officer). You need not list friends. However, you have an ongoing professional responsibility to treat any friends affiliated with NJIT no better or no worse, in the employment setting, than you would anyone else. If none, write "None".

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3. Please sign the following declaration if it applies:

Having read NJIT's policy on Conflicts of Interests, I certify that, except as set out above, I am not engaged in any form of employment, activity, or personal relationship that constitutes, or based upon an objective review of the facts could reasonably be interpreted to constitute, an actual or potential conflict with my position and responsibilities at NJIT.

\_\_\_\_\_  
Signature of Employee

If you cannot sign the above declaration, or if you are uncertain about any aspect of the policy and how it applies to you, please consult the Department of Human Resources.