Skidmore Conflict of Interest and Lobbying Disclosure Form for Employees

Every Skidmore College employee has an obligation to act in the best interests of the College when performing his or her job. Outside financial interests and legal commitments should not be permitted to create conflicts of interest that interfere with that primary obligation. Such a conflict of interest exists if an employee has an external financial interest or fiduciary or othe legal obligation that reasonably could be seen as creating an incentive for the individual to modify the conduct of his or her College activities or to influence the conduct of others. Conflicts of interestarise from stock ownership, board memberships, consulting relationships, and any activity from which the individual derives legal obligations or expects to receive remunerized from an entity outside the College. Conflicts ayarise from many ordinary and appropriate activities; the existence of a conflict does not imply wrongdoing on anyone's part when conflicts do arise, they must be recognized and disclosed, and the minimated or resolved propriately. Some relationships may create an appearance of conflict; those, too, are important to eliminate or resolved that we may maintain public confidence in the integrity of our activities. Additionally, certain lobbying activities directly on behalf of the College must be disclosed.

College. Please answer the questions below as fully as you car designated College official for review. You will be contacted if the

These forms will be treated confidentially. You must complete or significant changes in your outside interests or commitments or questions about the form or about specific potential or actual confident to contact the Office of the Vice President for Finance and A of the Board of Trustees.

For purposes of this form:

"Family" includes spouse or domestic partner, and the o

"Related" means so linked or associated that a reasonal

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Conflict of Interest Disclosure

Please consult the College's Conflict of Interest Policy, including the examples of Permissible Activities, prior to completing this form. Individuals receiving grants from external sources must comply with all

3. To the best of your knowledge, during the past twelve months, didappumember of your Familyor any Related Person receive a gift with a value of more than \$100 from any person or entity that would result in an actual or potential conflict o interest with your responsibilities at the College, or in the next twelve months do you expect to do so? Yes No(Ifes, please disclose by adding pages or attachments as needed)
4. During the past twelve months, have you had a fiduciary or management role (such as service as a president, chief financial officer, director or trustee), or other legal obligation to against ation other than Skidmore, or in the next twelve months do you expect to do so? Yes No(If yes, please provide the following information: name of organization and its fit on profit status; position(s) held; estimated time devoted tivity; and annual compensation, if any. (Note that service in a fiduciary or management role in a for fit entity requires prior approval by the Vice President for Finance and Administration of the College.)
5. Please disclose any other associattbas during the past twelve months, a reasonable person would believe could constitute, or appear to constitute, a conflict of interest.
Lobbying Disclosure
6. During the past twelve months, have you performed any lobbying activities directly or on behalf of the College to national, state, or local governmental officials, agencies, or entities, or in the next twelve months expect to do so? Yes No(If yes, please disclose by adding pages or attachments as needed)
By signing here, you arætifying that you have reviewed the College's Conflict of Interest Policy, that the information that you provide in this form is accurate to the best of your knowledge as of the date of your signature, and that you commit to providing an updated form the College whenever a material change occurs in the information you have provided.
Signature:
Print Name:
Date: