

**WITF Public Media
Ethics and Integrity Policy for the Organization, Board, Staff and Volunteers**

VI. Conflict of Interest Disclosure Form

Date: _____

Name: _____

Position (Director/Officer/senior staff member): _____

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest between WITF and your personal interests, financial or otherwise:

_____ *I have no conflict of interest to report*

_____ *I have the following conflict of interest to report (please specify both nonprofit and for-profit Boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member are an Officer or Director, or a majority shareholder, and the name of your employer and any businesses you or a family member own):*

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge. I have reviewed, and agree to abide by, the Policy of Conflict of Interest of WITF.

Signature: _____

Date: _____