

**BOARD CANDIDATE CONFLICT OF INTEREST FORM**

Several times per year Aspen board members need to certify that they have no conflicts of interest which would prohibit them from serving on the board. This is important for our annual audit, our annual lease aid application, etc. Feel free to contact Stephanie Smitley at Stephanie.Smitley@aspenacademymn.org with any questions.

1. Have you, or any related party of yours, had any material interest, direct or indirect, in any of the following transactions or pending transactions to which Aspen Academy was or is to be a party:

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Sale, purchase, exchange or leasing of property? | \_\_\_\_ | \_\_\_\_ |
| Receiving or furnishing of goods, services or facilities? | \_\_\_\_ | \_\_\_\_ |
| Transfer or receipt of income or assets? | \_\_\_\_ | \_\_\_\_ |
| Maintenance of bank balances as compensating balances for the benefit of another? | \_\_\_\_ | \_\_\_\_ |
| Other transactions? | \_\_\_\_ | \_\_\_\_ |

If yes, please explain: .

2. Have you or any related party of yours been indebted to or had a receivable from Aspen Academy at any time? Yes\_\_\_\_ No\_\_\_\_ If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

3. Have you or any related party of yours had any material interest, direct or indirect, in any transactions, or in any pending or incomplete transactions to which any pension, retirement savings, or similar plan provided by Aspen Academy was, or is to be, a party? Do not include payments to a plan or payments by the plan made pursuant to the terms of the plan.

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_\_\_\_\_\_.

4. I am employed by \_\_\_\_\_\_ .

My job function with my employer is \_\_\_\_\_\_ .

My spouse’s name is .

My spouse is employed by .

My spouse’s job function with his/her employer is .

The answers above are correctly stated to the best of my knowledge and belief.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_