PURPOSE:

It is the policy of the College to strictly monitor and to govern any real or perceived Conflicts of Interest. All employees, faculty, administrators and staff will adhere to the following procedures as respects any conflicts of interest.

Definition:

An employee shall be deemed to have a potential conflict of interest when:

A. The employee is an officer, director, trustee, partner, employee or agent of, or has a monetary interest in any person or entity involved in a transaction with or affecting the College, or;
B. The employee is aware that the employee’s spouse or any of their parents, brothers or sisters, or relatives is an officer, director, trustee, partner, or agent of, or has a monetary interest in a transaction with or affecting the College, or;
C. Without regard to (a) or (b) above, the employee’s independent judgment is, or might appear to be impaired by an existing or potential financial interest, or;
D. An employee supervises or participates in a decision affecting a relative of the employee.

Disclosure:

If an employee is an officer, director, partner, proprietor, associate, or general agent (other than a resident agent solely for service of process) of, owns a material interest in, any business entity granted the privilege to rate in the State of Florida, such employee shall file a statement disclosing such facts no later than forty-five (45) days after becoming an officer or employee or after the acquisition of such position or material interest. The statement shall give the name, address, and principal business activity of the business entity or the fact that a material interest is owned in the nature of that interest. New employees shall file the statement required herein, if applicable, no later than forty-five (45) days after their appointment or after the date their appointment begins.
Implementation:

Before an action is taken by an employee with or on behalf of the college where an actual or potential conflict of interest may exist, the employee shall:

A. Promptly make full disclosure of the proposed transaction to the employee’s supervisor; and
B. Refrain from acting until the employee has received written approval from the cognizant Vice President. In each case, the cognizant Vice President or the President, as the case may require, shall consult with Counsel to the Board prior to providing a written response to the employee.

The employee’s immediate supervisor will coordinate the individual’s conflict of interest concerns with the Vice President responsible for the action.

If the employee is a Vice President or an employee that reports directly to the President, full disclosure to and approval of the President is required.

The College’s Conflict of Interest Policy will be applied consistently and in accordance with the laws of the State of Florida.

STATE COLLEGE OF FLORIDA, MANATEE - SARASOTA

Conflict of Interest Statement

In accepting employment with State College of Florida, Manatee – Sarasota, I recognize that, as an employee of a State institution, I have a responsibility to conduct myself at all times to the end that my performance reflects credit upon and confidence in both myself and the institution which I serve.

To my knowledge, neither I nor any member of my immediate family (including my spouse and children) is engaged in, or has any financial or other interest in, any occupation or business which would be affected, either adversely or favorable, by a decision or act in which I would participate, or over which I might have some influence in the performance of my duties as an employee of State College of Florida, Manatee – Sarasota.

I am listing on the reverse side, all direct and indirect financial interests in, or affiliations with, business establishments which may conduct business with State College of Florida, Manatee – Sarasota or other education agencies with which I have relationship in the performance of my official duties. I will revise this list at any time in the future as needed so that it will, at all times, reflect such direct and indirect financial interests.

____________________________  ___________________________  ___________
Employee’s Name (print/type)             Employee’s Signature                     Date

____________________________
Division/Bureau/Section Name

State College of Florida, Manatee - Sarasota