### Arizona State University
*Disclosure of Substantial Interest Form*

**ASU Employee Name:** __________________________________________

**ASU Employee Identification Number:** __________________________

**University or Other Location of Employment:** ______________________

**Department or Unit:** __________________________________________

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#### Are you a researcher?

___ Yes. Please refer to the following and contact the Office of Research Integrity and Assurance for guidance.

- ACD 204–08, “Conflict of Interest”
- Office of Research and Integrity Assurance Information about Conflict of Interest
- Office of Research and Integrity Assurance Conflict of Interest Disclosure Form

___ No. Please read and follow instructions below for all other ASU employees.

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#### Are you an ASU employee (faculty or staff, but not a researcher)?

___ Yes. Please refer to the following resources. Then, fill in this form and submit two copies to the Office of General Counsel.

- ACD 204–08, “Conflict of Interest”
- OGC Briefing Paper on Conflict of Interest

If you have questions concerning your status, this form, and/or the disclosure requirements please contact the Office of General Counsel for guidance.

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### 1. Describe the interest that gives rise to this disclosure:

1.1. Individual’s Name:

1.1.1. If the foregoing individual is not the ASU employee making this disclosure, describe the relationship of the individual to the ASU Employee:

1.2. Name of business entity, if any, with which the foregoing individual is associated:

1.2.1. Type of business entity:

   ___ proprietorship
   ___ partnership
   ___ limited partnership
   ___ limited liability corporation
   ___ corporation
1. **Describe the interest that gives rise to this disclosure:**

1.2.2. State in which business entity was formed:

1.2.3. Tax ID# of the business entity (if known):

1.2.4. Office or position held by the individual named above:

1.2.5. Is the individual named above compensated? ____ Yes ____ No

1.2.6. Hours worked (or anticipated to be worked) on a weekly basis (if known):_____  
Beginning _____ Ending _____

1.2.7. Nature of the individual’s interest in the business entity:  
- Holder or owner of stock or ownership interest: ____ Yes ____ No  
Percent of ownership interest (if known):__________  
- Serves as a member of board or directors or other governing board: ____ Yes ____ No  
- Serves as an officer: ____ Yes ____ No  
- Serves as an employee: ____ Yes ____ No  
- Serves as a consultant, vendor, etc.: ____ Yes ____ No  
- Other. Please explain:

2. **Describe the Arizona Board of Regents or university contract, sale, purchase, service or decision in which the individual or business entity named above is involved:**

Please include any current university contract, sale, purchase, service or decision and any likely future university contract, sale, purchase, service or decision. Attach additional sheets if needed.

3. **Agreement of Non-Participation by ASU Employee:**

I understand that I must not participate in any ASU decision relating to this substantial interest and that “not participate” means that I must have no involvement in the decision making process and that I must not communicate with anyone about the decision. Further, I understand and acknowledge that agreements between ASU and the business entity identified above are subject to audit by ASU or the State of Arizona pursuant to A.R.S. § 35-214.

**SIGNATURE OF EMPLOYEE:**  
**DATE:**

**REVIEWED BY DEAN OR DIRECTOR OF THE COLLEGE OR DEPARTMENT:**  
Signature:  
Print Name:  
Title:  
Date: