

CONFLICT OF INTEREST DECLARATION FORM

Thank you for declaring and/or reporting an actual, potential, or perceived Conflict of Interest situation.

The information contained in this Conflict of Interest Declaration Form will remain confidential.

Sheridan is here to support you and provide guidance. Sheridan is committed to ensuring that all actual, potential, or perceived Conflicts of Interest are investigated, mitigated, and/or resolved in an appropriate manner.

Please follow the steps below to submit this Conflict of Interest Declaration:

1. Read through and familiarize yourself with the Conflict of Interest Policy.
2. Identify any actual, potential, or perceived Conflict of Interest situations that may exist and/or occur.
3. Fill out the attached Declaration of Conflict of Interest Form. Provide as many details as possible so that we can assist you with this Conflict of Interest.
4. Submit the Declaration of Conflict of Interest Form to the Office of the General Counsel. The Office of the General Counsel will determine the appropriate Responsible Office(s) at Sheridan for involvement.
5. Someone will be in contact with you to confidentially discuss the matter.
6. If necessary, a plan will be developed with you to manage, avoid, and/or mitigate any Conflict of Interest situation that you will report.

At any time during this process, you can confidentially speak with your immediate supervisor, The Office of the General Counsel, and/or the Vice President, Human Resources, as appropriate, to discuss or ask questions about the Conflict of Interest Policy or your Conflict of Interest Declaration.

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Name: _____

I have read the Conflict of Interest Policy and disclose the following matter:

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Signature: _____ Date: _____