ASLE Conflict of Interest Policy

Definition: What is a conflict of interest?
A conflict of interest arises when the personal or professional interests of a board or staff member are potentially at odds with the best interests of ASLE, or when a board or staff member has divided loyalties (also known as a “duality of interest”). Conflicts of interest can result in inappropriate financial gain, the appearance of a lack of integrity in ASLE’s decision-making process, and/or financial penalties and violations of IRS regulations. Because all of these outcomes damage ASLE, ASLE wishes to avoid them. ASLE takes a broad view of conflicts, and board and staff members should consider how a situation or transaction would appear to outside parties when identifying actual or possible conflicts of interest.

ASLE Policy
No member of ASLE’s Executive Council, its officers and coordinators, its committee members, or its staff shall derive any personal profit or gain, directly or indirectly, by reason of participation with ASLE. Each individual shall disclose to the organization any personal interest which he or she may have in any matter pending before the organization and shall not participate or cast a vote in any decision on such matter.

Disclosure of Conflicts
Board members and staff must, upon beginning to serve ASLE, complete a Conflict of Interest Disclosure Form. This form affirms that the board, committee or staff member:

a. has received, read, and understands the conflicts of interest policy,
b. has agreed to comply with the policy,
c. will amend and update the form promptly if any information therein changes substantially or new information arises, and
d. understands that ASLE is a charitable organization and that, in order to maintain its federal tax exemption, it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

In addition, the form asks each board and staff member to identify any actual or possible conflicts of interest, such as those that may arise from their relationship with family members, substantial business or investment holdings, and other transactions or affiliations with businesses and other organizations that they or their family members may have with businesses or other organizations. Board and staff must update this form as needed and must disclose any conflict, potential conflict, or appearance of a conflict to the ASLE President or Managing Director as soon as possible, so that ASLE can manage the conflict appropriately.
ASLE Conflict of Interest Disclosure Form

_____ I certify that I have received, read and understand the ASLE Conflict of Interest Policy.

_____ I certify that I agree to comply with this policy.

_____ I certify that I will amend and update the form promptly if any information therein changes substantially or new information arises.

_____ I understand that ASLE is a charitable organization and that, in order to maintain its federal tax exemption, it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

This form is to certify that I, except as described below, am not now nor at any time during the past year have been:

1. A participant, directly or indirectly, in any arrangement, investment, or other activity with any vendor, supplier, or other party doing business with ASLE which has resulted or could result in personal benefit to me.

2. A recipient, directly or indirectly, of any salary payments, loans or gifts of any kind or of any substantial free service, discounts or other fees from or on behalf of any person or organization engaged in any transaction with ASLE.

Any exception to the above are stated below with a full description of the transactions and of the interest, whether direct or indirect, which I have (or have had during the past year) in the persons or organizations having transactions with ASLE.

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Signature: ______________________________________

Printed Name: _____________________________________

Date: ______________________________