

ANCHORAGE SCHOOL DISTRICT
Conflict Of Interest
Application Procedures

Disclosure statements must be filed when an immediate family member wishes to do business with the Anchorage School District or the Municipality of Anchorage.

1. The employee filing the disclosure will read and understand the provisions of [Board Policy](#) 3311 and Administrative Requirement 3311.1(e) Ethics and Conflicts of Interest and [Municipal Code](#) Chapter 1.15 Code of Ethics in their entirety.
2. The employee filing the disclosure will complete the disclosure statement.
3. The employee filing the disclosure needs to sign the disclosure form.
4. The employee will send the signed disclosure statement along with a copy of their job description to the Purchasing Department using interoffice mail or email. (purchasing@asdk12.org)
5. The Director of Purchasing will review disclosure statement and, if deemed appropriate, forward the disclosure statement to the Municipal Ethics Board.
6. The Director of Purchasing will notify the employee that the disclosure statement was sent to the Municipal Ethics Board.

ANCHORAGE SCHOOL DISTRICT
PURCHASING/WAREHOUSE DEPARTMENT
4919 Van Buren Street, Anchorage, Alaska 99517-3137
Phone: (907) 742-8621

DISCLOSURE STATEMENT
By ASD Board Member or ASD Employee to Avoid Conflict of Interest

Applicant: (Board Member/ASD Employee)	Mailing Address:
_____	_____
Position:	(City, State, Zip)
_____	_____
School/Dept:	Work Phone #:
_____	_____
Date Submitted:	Email:
_____	_____

This Form is meant to disclose to the Superintendent or his/her designee and the Anchorage Municipal Ethics Board that my immediate family* member(s) listed below intend to do business with the District or the Municipality of Anchorage, and that I will disqualify myself from participating in any decision by the District to recommend award of or to award a contract to the business entity.

Name of business in which bid, proposal or quotation will be submitted: _____

Address of business: _____

Business phone number: _____

Alaska Business License number: _____

Name of Immediate Family Member ¹	Relationship to Board Member / ASD Employee	Title or Position in Business	Percent of Financial Interest in Business

Description of goods or services sought to be provided:

I certify that I have read and understand the provisions of Board Policy 3311 and Administrative Requirement 3311.1(e) Ethics and Conflicts of Interest and Municipal Code Chapter 1.15 Code of Ethics in their entirety. This includes AR 3311.1(e).1 "No Board member, employee, or a member of their household, shall acquire, directly or indirectly, an economic interest in a District or municipal contract, or engage in business with the District or the municipality, unless the contract is competitively solicited and other requirements of Board Policy and section 1.15 of the AMC are met."

Signature of ASD Employee/Board Member

Date.

Date Disclosure Expires: 06/30/20__**

* Immediate family means: 1. The spouse, child (including a stepchild and an adoptive child), parent, sibling, grandparent, aunt, or uncle of the person; and 2. A parent or sibling of the person's spouse; and 3. Any member of the person's household.

**Disclosures expire on the last day of the fiscal year in which they are granted and must be renewed annually