AFCC CONFLICT OF INTEREST POLICY AND DISCLOSURE FORM

This form should be signed by each new chapter board member and the sitting board annually.

Conflict of Interest Policy for the Association of Family and Conciliation Courts

Introduction
It is in the interest of the Association of Family and Conciliation Courts (AFCC) and its chapters, board members, individual staff, paid consultants, and volunteers to strengthen trust and confidence in each other, to expedite resolution of problems, to mitigate the effect of and to minimize organizational and individual stress that can be caused by a conflict of interest.

Conflict of Interest Policy
The AFCC policy and standard of behavior for board members, the executive director and paid consultants is to avoid scrupulously any conflict of interest between the interests of AFCC on one hand and personal, professional and business interests on the other. This includes avoiding potential and actual conflicts of interest, as well as perceptions of conflict of interest, bias, wrongdoing or an appearance of impropriety. Violation of this policy may result in termination of the relationship with AFCC, including, but not limited to termination of employment, dismissal from the Board or a leadership position in AFCC or a Chapter.

Conflict of Interest Statement
I agree that I shall disclose, in writing on the Conflict-of-Interest Disclosure Form, all potential conflicts of interest upon election, hiring or appointment. I shall make full disclosure of any interest in and relationships with individuals, businesses and other professional organizations that could potentially result in a conflict of interest. I agree to update the Conflict-of-Interest Disclosure Form annually, by June 15, as appropriate, including, but not limited to, disclosure of new affiliations and/or appointments.

I agree that in the course of meetings or activities, I will disclose any interests in a transaction or decision where I (including my business or other nonprofit or professional affiliations), my family and/or my significant other, employer or close associates will receive a benefit or gain. After disclosure, I understand that I will be asked to refrain from participation in the discussion and will not be permitted to vote on the question.

I also agree that if I intend to comment on or present a statement or action to the AFCC Board or on behalf of AFCC in which I have an interest in the issue and/or outcome, I shall disclose this information to the President, in writing, before taking any action.

I understand that this policy is meant to supplement good judgment, and I will respect its spirit as well as its wording.

Please list individuals, businesses, professional organizations or other relationships in which you serve in a position of influence (e.g. principal, partner or employee, leadership position, board member,

committee chair, task force member, etc.). Please explain the interest or relationship that could potentially result in a conflict of interest.

Organization Interest/Relationship

I affirm that the information set forth above is true and complete to the best of my knowledge. I have reviewed and signed the AFCC Conflict of Interest Policy adopted by the AFCC Board on May 31, 2006.

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Signature

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Date