

**Personal Conflict of Interest Disclosure Form  
Subcontractor Employees in Staff Augmentation Positions (September 2012)**

Print name and badge #: \_\_\_\_\_

Briefly describe the work you perform for UT-Battelle: \_\_\_\_\_

**WHAT IS A PERSONAL CONFLICT OF INTEREST (PCOI)?** A PCOI arises when an individual who performs services for UT-Battelle in a staff augmentation position has a personal or relational interest that creates, appears to create, or potentially creates conflicting motives, goals, or actions between:

- UT-Battelle’s expectation is that staff augmentation individuals will be fair and objective in performing assigned duties; and
- The individual’s personal interests or those of a spouse, significant other, children, or member of the individual’s household.

Because a PCOI can arise due to the mere appearance of a conflict or a potential conflict, the fact that a PCOI exists does not imply any wrongdoing. However, failure to report facts relevant to a PCOI is a serious violation of UT-Battelle’s ethical expectations for individuals in staff augmentation positions.

Examples of PCOI’s include – but are not limited to – the following situations:

- Having a close relative who works in the same ORNL organization as you.
- Making employment, business, contracting, or financial decisions that favor an individual you have a close relationship with.
- Using or disclosing non-public information from ORNL for personal benefit or for the benefit of a third party.
- Receiving gifts from vendors who do work for, or seek to do work for, UT-Battelle.
- Using one’s affiliation with ORNL as a basis for obtaining favors from vendors who do work, or seek to do work, for UT-Battelle.
- Unauthorized use or misuse of ORNL equipment, funds, or other assets for personal benefit or gain.

**DISCLOSURE OF PCOI INFORMATION.**

Answer the following questions and, on the back of this form, provide detailed information that explains any “Yes” answer. (Note: “Yes” answers will not disqualify you from working at ORNL unless the facts cannot be mitigated).

1. Do you have a financial interest or income from any entity that does business with UT-Battelle?  
(Other than the employer who has placed you at ORNL.)  Yes  No
  
2. Does your spouse, child, significant other, or any member of your household work in the same  
ORNL organization as you? (If “Yes,” provide name and ORNL phone number.)  Yes  No
  
3. Are you aware of any other facts or circumstances that could lead to a possible PCOI, including  
the appearance of a PCOI or a potential PCOI?  Yes  No

**ACKNOWLEDGMENT:** I certify that I have answered these questions to the best of my knowledge and belief, and the explanatory information provided on the reverse side (if any) is accurate and complete to the best of my knowledge. I further agree to promptly submit a new PCOI Disclosure form if any facts or circumstances arise in the future that would result in a revision of my answers on this form.

Questions regarding this form should be discussed with the ORNL Office of General Counsel, (865) 241-4961.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Submit this form to your employer within 5 working day of commencing work for UT-Battelle.**