

**CONFLICT OF INTEREST DECLARATION:**

The following companies, organizations and/or enterprises are ones with which I have an ongoing professional relationship and which have some interest in the subject matter of my presentation. (Add extra pages or attach a list as needed).

Company	Nature of Relationship

\_\_\_\_ Check here if you have no conflicts

**COMMERCIALISM POLICY**

The Washington State Academy maintains full control over the planning, content and implementation of all programs presented during the educational event including the selection of speakers, moderators and facilitators. The intent of the educational event is to provide quality sessions focused on educational content free from commercial influence or bias. The Washington State Academy prohibits educational presentations that have as their purpose or effect promotion and/or advertising. This specifically includes pervasive or inappropriate use of brands, trademarks or logos. Presentations designed primarily as describing commercially marketed programs, publications or products will not be accepted or tolerated. To this end, program planners, session participants and sponsors are prohibited from engaging in scripting or targeting commercial or promotional points for specific emphasis, or other actions designed to infuse the overall content of the program with commercial or promotional messages. Statements made should not be viewed as, or considered representative of, any formal position taken on any product, subject, or issue by the Washington State Academy. It is the responsibility of the program planner to ensure compliance by all speakers.

I acknowledge that I have read and will adhere to the Washington State Academy Commercialism Policy

**DISCLOSURE OF INTEREST**

I hereby certify that, to the best of my knowledge, no aspect of my current personal or professional circumstances place me in the position of having a conflict of interest with any interest of the Washington State Academy relating to this presentation. I hereby certify that, to the best of my knowledge, neither I (including any member of my immediate family) nor any individual or entity with whom or with which I have a significant working relationship have (has) received something of value from a commercial party related directly or indirectly to the subject of this presentation. While an interest or affiliation with a corporate organization does not prevent you from making a presentation, the relationship must be made known to attendees. Failure to fully complete and return this form will require the Washington State Academy to identify a replacement speaker for your presentation. Failure to disclose accurate information will negate your ability to participate in future Washington State Academy events.

- The foregoing statements are true without exception.
- The foregoing statements are true except as reported in detail below.

**Affiliation/Financial Interests**

*Please select any of the exceptions to the Disclosure of Interest and then detail them below.*

Grants/Research Support	
Consultant	
Stock Shareholder	
Honorarium	
Other Financial and/or Material Support	

**I HAVE READ AND AGREE TO COMPLY WITH THE ABOVE RESPONSIBILITIES. I AGREE TO INDEMNIFY AND HOLD HARMLESS the Washington State Academy, ITS MEMBERS, EMPLOYEES, AND AGENTS, FROM AND AGAINST ALL LIABILITY, INCLUDING LEGAL FEES, ARISING FROM BREACH OF ANY OF THESE REPRESENTATIONS.**

<b>Speaker Name (please print):</b>	
<b>Speaker Signature:</b>	<b>Date:</b>

**Please return signed agreement by                     .**