# Conflict of Interest Disclosure Form

|  |
| --- |
| Title of Procurement |
| Respondent’s Organization Name |
| Please list any and all individuals who assisted, contributed and/or substantially influenced the writing, research, preparation and submission of this quote: |
| Are any individuals involved in the writing, preparation, research and/or submission of this quote members of SDWP’s Workforce Development Board (WDB), San Diego Consortium Policy Board, Adult Programs Committee, Youth Council and/or SDWP staff? If yes, please list those individuals: |
| Were any of the individuals involved in the writing, preparation, research and/or submission of this quote employed by SDWP within the last twelve (12) months? If yes, please list those individuals: |
| If applicable, please describe any additional conflict of interest disclosure below. |

## I hereby certify that the organization listed above has no conflict of interest as stated in the procurement.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Respondent Name | Respondent Signature | Date |