

Conflict of Interest Disclosure with Respect to Graduate Student Education

Individuals declaring a potential conflict of interest must submit a completed form to the Dean of the Faculty of Graduate Studies—fgsdean@yorku.ca, CC'ing the relevant resource Faculty Dean, as early as possible to arrive at an appropriate resolution. Information on when to complete this form, how it will be processed, and how information and decisions will be communicated and retained can be found on the Faculty of Graduate Studies website.

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Personal Details				
Surname	Given Name(s)	Email		
Phone	Graduate Program	Position Title		
Conflict of Interest Disclosure				
Real Perceived	Potential Unknown			
determining next steps: o Please describe the nature of the rean evaluation or adjudication impac	eal, perceived or potential conflict of intecting or appearing to impact the integrity	erest that may result in participation in		
Conflict of Interest Management Plan				
Please indicate how you plan to manage the real, perceived or potential conflict of interest in regard to the relevant evaluation or adjudication. Possibilities may include:				
 Declaration to relevant bodies at the time of evaluation or adjudication Restricted involvement in certain activities Recruitment of another individual to oversee all or a portion of the activities Recusal 				

Signature			
I am submitting a disclosure of a conflict of interest or potential conflict of interest, pursuant with the Conflicts of Interest for Faculty and Librarians (Policy and Guidelines).			
Name	Date (mm/dd/yyyy)	Signature	
FGS Decanal Response			
I have reviewed the Conflict of Interest Disclosure and believe that:			
 (The FGS Dean, in consultation with the relevant resource Faculty Dean, will normally select one of the following) the conflict of interest outlined does not amount to the level of impacting your decision making, and nothing further is required the conflict of interest outlined does not amount to the level of impacting your decision making; however, a brief declaration to the relevant committee/body that an association exists but that your participation can proceed ahead would be appropriate the conflict of interest management plan as outlined is sufficient for the situation described, and that proceeding with these measures will ensure relevant activities can move forward the conflict of interest management plan as outlined must be supplemented by further measures to ensure fairness in the proceedings: (Insert Details) 			
FGS Office Use only		(500.5)	
Name (FGS Dean)	Date (mm/dd/yyyy)	Signature (FGS Dean)	
CC (relevant Resource Faculty Dean)			

Privacy: Personal information in connection with this form is collected under the authority of *The York University Act*, 1965 and will be used for educational, administrative and statistical purposes. If you have any questions about the collection, use and disclosure of personal information by York University, please contact: Faculty of Graduate Studies, 230 York Lanes, (416)736-2100 x 55521.