

The State Archives
Local Government Records Management Improvement Fund
Conflict of Interest Statement
For Grant Application Reviewers

The State Archives has an obligation to ensure that the review of applications for grants under the New York State Local Government Records Management Improvement Fund is both fair and objective. To achieve these ends it is essential that any reviewer who has a connection to an applicant or might benefit directly or indirectly from a grant be excluded from the review of associated applications. Even the appearance of a conflict of interest must be avoided. Consequently, we have developed this conflict of interest statement, which applies to members of the Local Government Records Advisory Council as well as to outside reviewers. Please review the review requirements described below, and then indicate in the following space the log numbers of any applications that might pose a conflict of interest to you. Then, sign and date this document and return it via email to archgrants@mail.nysed.gov. If you have any questions about this statement, or wish to discuss any application where you may have a conflict, please call the Grants Administration Unit at 518-474-6926.

No one may review, participate in panel discussion of, or vote on any grant application under consideration for funding by the Local Government Records Management Improvement Fund program if the person:

- **Is a member of the governing body or is employed by the applicant, has been so employed within the past two years, or has any immediate family member who is or has been so employed.**
- **Prepared or provided advice on preparing the application**
- **Expects to receive a payment, fees or expenses of any kind from the project proposed in the application**

I have read the above statement and agree to abide by its principles. Furthermore, I hereby identify by grant log number the following applications subject to the panel to which I have been assigned that constitute or would appear to represent a conflict of interest for me should I review them.

ID # 0580 - -	ID # 0580 - -	ID # 0580 - -	ID # 0580 - -
ID # 0580 - -	ID # 0580 - -	ID # 0580 - -	ID # 0580 - -

Reviewer's Signature

Date:

Reviewer's Name (*Please print or type*)