

**ACF CERTIFICATION FORM REGARDING
CONFLICT OF INTEREST, CONFIDENTIALITY AND NON-DISCLOSURE
FOR REVIEWERS OF GRANT APPLICATIONS**

Reviewers are individually responsible for evaluating their own affiliations and financial interest, and those of their close relatives and professional associates, that relate to their duties as reviewers before they review any applications.

Conflict of interest is defined as: any action by a reviewer in the grants review or awarding process which would affect, or could appear to affect, the reviewer's financial interest, or would cause the reviewer's impartiality in the grants process to be questioned. Specific situations include, but are not limited to, the following: a reviewer may not participate in the review or award of a specific grant application in which any of the following has a financial interest:

- (1) the reviewer, the reviewer's spouse, parent, child, or partner;
- (2) any organization (including a parent or subsidiary) in which the reviewer, the reviewer's spouse, parent, child, or partner serves as officer, director, trustee, partner or is otherwise similarly associated;
- (3) any organization (including a parent or subsidiary) in which the reviewer, the reviewer's spouse, parent, child, or partner is negotiating for or has an arrangement concerning prospective employment or other similar association; or
- (4) any organization (including a parent or subsidiary) in which the reviewer, the reviewer's spouse, parent, child, or partner has an interest with respect to any pending grant application competing under the same program as any other grant application to be reviewed by the same committee or group of field researchers.

I have read and understand the above definition of conflict of interest and have examined the attached list of applications to be reviewed, and hereby certify that, based on the information provided to me, I do not have a conflict of interest in any of them. If during the review there is an appearance of or actual conflict of interest, I will recuse myself from the review of the application or will obtain an appropriate waiver.

In addition, I fully understand the confidential nature of the evaluation and agree: (1) to destroy or return all materials related to the evaluation; (2) not to disclose or discuss the materials associated with the review, my evaluation, or the review meeting outside of that meeting or with any other individual except as authorized by the grants management officer; and (3) to refer all inquiries concerning the review to the grants management officer.

Application Reviewer

Signature _____

Date _____

Attachment: List of applications to be reviewed.
