

**LEADERSHIP CONFLICT OF INTEREST
POLICY AND DISCLOSURE FORM**

In their capacity as directors/leaders, the members of the Society of Emergency Medicine Physician Assistants (SEMPA) must act at all times in the best interests of SEMPA. The purpose of this policy is to help inform the Board about what constitutes a conflict of interest, assist the Board in identifying and disclosing actual and potential conflicts, and help ensure the avoidance of conflicts of interest where necessary. This policy may be enforced against individual Board of Director members or leaders as described below.

1. Members of the SEMPA Board of Directors and other SEMPA leaders have a fiduciary duty to conduct themselves without conflict to the interests of SEMPA. In their capacity as Board Members / leaders, they must subordinate personal, individual business, third-party, and other interests to the welfare and best interests of SEMPA.
2. A conflict of interest is a transaction or relationship, which presents or may present a conflict between an individual's obligations to SEMPA and the individual's personal, professional, business or other interests.
3. All conflicts of interest are not necessarily prohibited or harmful to SEMPA. However, full disclosure of all actual and potential conflicts, and a determination by the disinterested members of the SEMPA Board of Directors are required. The interested Board member /or leader will be recused from participating in debates and voting on matters related to the potential conflict.
4. All actual and potential conflicts of interests shall be disclosed by SEMPA Board members / leaders to the SEMPA Board of Directors through the annual disclosure form and/or whenever a conflict arises. The disinterested members of the SEMPA Board shall make a determination as to whether a conflict exists and what subsequent action is appropriate (if any). The SEMPA Board shall inform the individual of such determination and action in writing. The Board shall retain the right to modify or reverse such determination and action, and shall retain the ultimate enforcement authority with respect to the interpretation and application of this policy.
5. On an annual basis, all members of the SEMPA Board and all SEMPA leaders shall be provided with a copy of this policy and required to complete and sign the acknowledgment and disclosure form below. All completed forms shall be provided to and reviewed by the SEMPA Board along with all other conflict information that has been provided.

I have read the SEMPA Conflict of Interest Policy set forth above and agree to comply fully with its terms and conditions at all times during my service as a member of the SEMPA Board of Directors or SEMPA leadership. If at any time following the submission of this form I become aware of any actual or potential conflicts of interest, or if the information provided below becomes inaccurate or incomplete, I will promptly notify the SEMPA President in writing.

Disclosure of Actual or Potential Conflicts of Interest:

SEMPA Board Member / Leader Signature: _____

Board Member / Leader Printed Name: _____ **Date:** _____