

Date

## **Conflict of Interest Disclosure Form**

## Lakeview Academy of Science, Arts and Technology

Policy Statement (ratified by <b>School's</b> Board of Directors on 05-10-07)
I have no conflict of interest to report
I have the following conflict of interest to report (please specify):
The undersigned, by their affixed signature, certifies that they have received, read, and understand the implications of the Conflict-of-Interest Policy. The undersigned also agrees to comply with the policy.
Signature
Printed Name