Employee Name:

Employee Position:

The employee and line management should complete the following written plan to reduce, eliminate, or manage each conflict of interest and conflict of time commitment identified. A guideline for the documentation can also be accessed on the Human Resource website under Forms: Conflict of Interest – Plan to Reduce, Eliminate, or Manage a Conflict of Interest and Conflict of Time Commitment.

1. Description of Potential Conflict of Interest:

2. Potential impacts of the conflict(s) on work responsibilities:

3. Specific plan arranged between the employee and immediate supervisor to manage, reduce, or eliminate the conflict(s).

Effective Period of this Management Plan (one year):

Approved by the Employee:

________________________________________________________________________  ___________________________________________________________________
Name:  Date:

Approved by Employee Supervisor:

________________________________________________________________________  ___________________________________________________________________
Name:  Date:

Approved by Dean/Director:

________________________________________________________________________  ___________________________________________________________________
Name:  Date: