Conflict of Interest Statement for use by ACS Career Consultants Volunteer Referral Program

Your name: ...........................................................................................................................................

A conflict of interest is any situation in which the private interests of a Career Consultant could cause the Career Consultant to make decisions that may be perceived as not being in the best interest of the organization or the member they are serving. Thus, “conflict of interest” includes an actual or perceived interest by a Career Consultant or the client member in any matter that results in, or has the appearance of resulting in, personal or professional gain. In addition, “conflict of interest” includes an actual or perceived interest by a Career Consultant or client in any matter that results in, or has the appearance of resulting in, organizational gain by an organization other than the ACS in which the Career Consultant or the client member play an active role.

ACS provides career counseling services through its dedicated volunteers to its members. ACS does not endorse, recommend, or make representations with respect to any additional services or products which may be offered by its volunteers. Individuals are free to hire anyone they believe will enhance their ability to improve their career, but they do so at their own risk. ACS retains the right to terminate consultants for reasons which include, but are not limited to, poor career counseling and using the service only to seek potential clients.

ACS Career Consultant responsibilities are in the ACS Careers Consultant Guidelines listed on the ACS Careers website under the ‘Becoming a Career Consultant’ link. Please describe the nature of your principal employment and state briefly if there might be any direct or indirect conflicts of interest (even if minor) with your ACS work:

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Please describe here any secondary employment, consulting arrangements, directorships or memberships on boards or committees of other organizations, even if you are not paid for your services, and indicate if these might cause potential conflicts of interest: (If none, simply state “none).

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By my signature below, I represent that I have read, understand and agree to be bound by the above ACS Conflict of Interest policy. I represent and agree that, if any conflict of interest or an appearance of conflict of interest arises, I will provide notice of such conflict to the ACS through CEPA. Furthermore, I agree to keep confidential any and all ACS proprietary and confidential information, to use such information only to benefit the Society and not to disclose at any time any such proprietary and confidential information.

___________________     ______________________________________________
Date           Signature