



### **Statement of Confidentiality and Conflict of Interest for Scholarship Selection Committee Members**

Statement of Confidentiality: Information contained in student scholarship application forms, essays and letters of recommendation must be maintained in a confidential manner at all times.

As a member of a scholarship selection committee who has access to the above information, you are required to honor the confidentiality of all applicant information. The unauthorized modification, deletion, or disclosure of information contained within these documents may compromise the integrity of the volunteer committee structure, Thompson Education Foundation and its programs, and otherwise violate individual rights of privacy.

- Distribution and/or reproduction of any application forms, essays, and letters of recommendation outside the intended and approved use is strictly prohibited.
- A scholarship's donors may not control the selection committee and must make up less than 50% of a committee. This means that no combination of donors, persons appointed or designated by donors, and persons (a term that includes partnerships, corporations and trusts as well as individuals) related to them may constitute a majority of the committee, be given a veto power, be allowed to chair the committee or otherwise be permitted to control the committee's decisions. For example, if there are two donors on a committee, there must also be three non-donor members on the committee.
- Conflict of Interest:
  - If you are related to any of the applicants as a parent, step-parent, grandparent, step-grandparent, sibling, or spouse, please disclose the conflict to TEF and the chairperson of your committee. In a case where you have a conflict of interest, we ask that you not participate on the committee this year.
  - If you know any of the applicants, you may use your discretion and/or the discretion of the committee as to whether you should participate in the selection discussion and/or vote on that applicant. If you have questions about your eligibility for this year's committee, please contact Thompson Education Foundation.
  - Donors and their immediate families are not eligible for assistance from the scholarship for which they are the primary donor or for whom the fund is named.



## Scholarship Confidentiality & Conflict of Interest

*Please review and initial or answer the following:*

I have read and understand the conditions for participation on the Thompson Education Foundation Scholarship Selection Committee.

I agree \_\_\_\_\_(initial)

I agree to abide by all the above conditions during my term of service on the Thompson Education Foundation Scholarship Selection Committee.

I agree \_\_\_\_\_(initial)

I will respect the privacy of all applicants whose applications I read during my term of service and into the future.

I agree \_\_\_\_\_(initial)

I understand that under no circumstances may I contact any scholarship applicant or recipient without their express permission.

I agree \_\_\_\_\_(initial)

Are you, or your family members, donors to the fund? Yes  or No

Additional Information: \_\_\_\_\_

Name of Scholarship: \_\_\_\_\_

Committee Member Name: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_