

Attachment 1

Workforce Solutions \_\_\_\_\_(Board)

### **Nondisclosure and Conflict of Interest Statement**

#### **Instructions**

The Board must complete this form for each Board member or Board staff member designated by the Board to review the proposals of local Adult Education and Literacy (AEL) providers.

The Board member or Board staff member designated to review proposals must fill out the form, print it, sign it, scan it, and submit it as an e-mail attachment to TWC at:

[RFPgroup@twc.state.tx.us](mailto:RFPgroup@twc.state.tx.us)

The e-mail must include the subject line:

RFP 320-18-01 (Board Name) Nondisclosure and Conflict of Interest Statement

Boards must use the following naming convention for electronic files:

Name of Board Area.NameofReviewer

Example: Alamo.JohnSmith

#### **Nondisclosure and Conflict of Interest Statement Section**

I hereby certify that the following statements are true and correct and that I understand and agree to be bound by the commitments contained herein.

I acknowledge that I have been appointed by Workforce Solutions

\_\_\_\_\_(Board)

to conduct reviews of local Adult Education and Family Literacy Act grant proposals submitted to the Texas Workforce Commission (TWC) to determine whether the proposals are consistent with the Board's local plan, as described in 34 CFR §463.21, or that I am otherwise involved in the review process of the grant solicitation cited above. I agree to perform any and all review and recommendation functions in an unbiased manner, to the best of my ability, and with the best interest of the State of Texas paramount in all decisions.

I am acting of my own accord and am not acting under duress. I am not currently employed by, nor am I receiving any compensation from, nor have I been the recipient of any present or future economic opportunity, employment, gift, loan, gratuity, or other consideration in connection with any proposal or involved offeror in return for favorable

consideration. I have no preconceived position on the relative merits of any of the proposals nor have I established a personal preference or position on the worth or standing of any offeror participating in this action. I do not have any conflict of interest, personal or organizational, real, apparent or potential, in participating in this grant proposal review. If, during the review process I become aware of an actual or potential conflict of interest, I will immediately notify the Board or the Board's representative of record and seek his or her advice on withdrawing from the review.

I agree not to disclose or otherwise divulge any information pertaining to the grant proposal review to anyone other than the authorized agency contact (as defined in TWC's Request for Proposal, 320-18-01), leader of the Board's review committee, or other members of the Board's review committee. I understand that the phrase "disclose or otherwise divulge" includes, but is not limited to, reproduction of any part or portion of any proposal, or removal of the same from designated areas without prior authorization from the leader of the Board's review committee.

Finally, if anyone outside of the Board's review committee or those officially involved with this review of a grant application seeks information about the grant solicitation, I will not supply any information but will instead refer him or her to the leader of the Board's review committee.

(Note: The Board member or Board staff member designated to review proposals must complete the form, print it, sign and date it, scan it, and submit it as an e-mail attachment to TWC at [RFPgroup@twc.state.tx.us](mailto:RFPgroup@twc.state.tx.us).)

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Name	Title
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Signature	Date
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