

JOSEPH CITY UNIFIED SCHOOL DISTRICT NO. 2

BCB-E BOARD MEMBER CONFLICT OF INTEREST DISCLOSURE FORM, Exhibit

Status: Presented for adoption, October 13, 2026 (first read September 15, 2026).

EXHIBIT

BOARD MEMBER CONFLICT OF INTEREST

DISCLOSURE FORM

Governing Board members must file a Conflict of Interest Disclosure within five (5) calendar days after assuming office and at least annually thereafter, either identifying any substantial interest the board member or the board member's relative has or stating that neither the board member nor the board member's relative has any substantial interest requiring disclosure.

All Conflict of Interest Disclosure Forms shall be filed with the Administrative Assistant to the Superintendent, Joseph City Unified School District No. 2 District Office, 8176 Westover Avenue, Joseph City, Arizona 86032, and maintained in the District's official records in accordance with law.

It is the board member's responsibility to update and submit a revised Disclosure Form to the location/department noted above within fifteen (15) calendar days after any new substantial interest arises following the date of the most recent disclosure.

I, _____, do hereby indicate that:

I am presently a District Governing Board Member of the Joseph City Unified School District No. 2, and that;

A. I understand my responsibility for disclosing conflicts of interest as required by Arizona law and Policy BCB;

B. I understand the statutory consequences for noncompliance with conflict of interest in A.R.S. 38-510 and any additional consequences imposed in accordance with Policy BCB;

C. I agree to comply with all conditions and restrictions the District imposes regarding my involvement for which I or my relative have a conflict of interest;

D. I agree to submit an updated Disclosure Form for any changes to circumstances within fifteen (15) days.

Date Signature

STATEMENT OF NO CONFLICT

To be completed only if you do not or your relative does not have a conflict of interest.

I, _____, do hereby indicate that I do not have, and none of my relatives has, a substantial interest in any contract, sale, purchase, service, decision, investigation, or other matter of the Joseph City Unified School District No. 2.

Date Signature

STATEMENT OF CONFLICT

To be completed only if you or your relative has a conflict of interest.

I (or my relative[s]: _____) have a substantial interest in the contract, sale, purchase, decision, investigation, or other matter by the Joseph City Unified School District No. 2 Governing Board as described below.

Identify the contract, sale, purchase, service, decision, investigation, or other matter in which you or your relative may have a “substantial interest” under A.R.S. §§ 38-501 to 511. (Use as much space as necessary.)

Describe the “substantial interest” referred to above. (Use as much space as necessary.)

STATEMENT OF DISQUALIFICATION FROM PARTICIPATING IN A GOVERNING BOARD MATTER

To be completed if you have a conflict as identified above with an item on a Governing Board Meeting Agenda.

To avoid any possible conflict of interest under A.R.S. §§ 38-501 to 511, I will refrain from participating in any manner on Item ____ on the _____ (date) Governing Board Agenda because I or my relative has a conflict of interest in the matter. If I have not previously disclosed this conflict of interest, I will prepare and submit an updated Board Member Conflict of Interest Disclosure Form that provides the necessary information regarding my conflict.

I understand that I should also orally indicate my conflict with the Agenda Item at the meeting, if I am in attendance, and then refrain from participating in any matter.

This Statement of Disqualification will be maintained with the minutes of the Governing Board meeting at which I have declared my conflict.

Date Signature