

TCA Conflict of Interest Waiver – Personal Business/ Endeavor on School Campus

Date of Request: _____ Staff Member: _____

Staff Member's TCA Position and Location: _____

Description of Proposed Personal Business/Endeavor: _____

While conducting personal business:

1. Will the staff member be interacting with students? ____Yes ____No
2. Will staff member be working with a student whom he/she evaluates?
____Yes ____No
3. Will the staff member be working be tutoring/giving private lessons to a student he/she evaluates in the same subject area? ____Yes ____No
4. Will the staff member be meeting with a student one-on-one? ____Yes ____No
5. Does the staff member need permission to contact parents? ____Yes ____No
6. Does the staff member need permission to use TCA facilities? ____Yes ____No
If yes, what TCA facilities will be utilized? _____
7. What is the timeframe for the request? _____
8. What compensation or personal benefit will the staff member receive for the services? (attach a schedule if needed.)

Has TCA requested the staff member to do personal business on campus? ____Yes ____No

If yes, what dept./supervisor has requested the work? _____

Per Policy GBEA-TCA, I am requesting permission to conduct personal business or endeavor as outlined above that has a nexus to The Classical Academy. I agree that I will maintain professional boundaries with parents and students and will use my personal or private business email to communicate.

I will not promote the business or endeavor during student contact time. During school hours, any promotion would be done during student lunch time and/or my lunch time. All other promotion will be done outside of school hours. I understand I **do not** have permission to use TCA website,

social media, daily announcements, school publications, or student or parent contact information for promotion. All advertising at TCA will be submitted to school administration for posting on the community bulletin board.

I understand that as a TCA employee and an employee of a public school I should not receive any preferential treatment or have inappropriate private gain due to my position. As a result, any prices paid by students or parents will be kept competitive.

Signature of TCA Staff Member: _____ **Date:** _____

Name of TCA Supervisor Requesting Services: _____ **Date:** _____

Signature of TCA Supervisor Requesting Services: _____ **Date:** _____

Please turn in this request to the TCA Director of Human Resources, as this request involves staff conflict of interest. The director will work with TCA President to see that the request is processed.

TCA President Determination

_____ Yes, I give the staff member permission to conduct personal business or complete a personal endeavor at TCA as outlined above.

Approved timeframe: _____

_____ No, I do not give the staff member permission to conduct personal business or complete a personal endeavor at TCA as outlined above.

TCA reserves the right to reevaluate the conditions of this request and change the determination at any time.

Comments: _____

Signature of TCA President: _____ **Date:** _____

cc: TCA Director of Human Resources
TCA President