



WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA)
BOARD MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_
Business/Employer/Labor Organization/CBO: \_\_\_\_\_ No. of Employees: \_\_\_\_\_
Website: \_\_\_\_\_
Address: \_\_\_\_\_
Your Occupation/Title: \_\_\_\_\_
Work Telephone: \_\_\_\_\_ Cell Telephone: \_\_\_\_\_ Email: \_\_\_\_\_
( ) \_\_\_\_\_ ( ) \_\_\_\_\_

CHOOSE FROM ONE OF THE FOLLOWING FIVE GROUPS YOU WILL REPRESENT

1. BUSINESS REPRESENTATIVE

I am an owner, executive, or operating officer in my business. [ ] Yes [ ] No
I have optimal decision-making or hiring authority in my business. [ ] Yes [ ] No
My business is part of the \_\_\_\_\_ industry sector
I have been nominated to serve on the LWP Workforce Board by \_\_\_\_\_, a local business organization or business trade association.

2. LABOR REPRESENTATIVE

I represent \_\_\_\_\_, a labor organization, and have been nominated to serve on the LWP Workforce Board by \_\_\_\_\_.

3. WIOA TITLE II - Adult Education & Literacy / HIGHER EDUCATION REPRESENTATIVE (Circle One)

I represent \_\_\_\_\_, and have been nominated to serve on the LWP Workforce Board by \_\_\_\_\_.

4. ECONOMIC DEVELOPMENT/WAGNER PEYSER/VOC REHABILITATION REPRESENTATIVE (Circle One)

I represent \_\_\_\_\_

**5. COMMUNITY-BASED ORGANIZATION REPRESENTATIVE**

I represent \_\_\_\_\_, a community organization.

The organization addresses needs of individuals with barriers to employment.  Yes  No

The organization serves veterans or individuals with disabilities.  Yes  No

The organization involves the training or education of youth or adults.  Yes  No

The organization relates to transportation, housing, or public assistance.  Yes  No

This is a philanthropic organization.  Yes  No

(Other) The organization involves \_\_\_\_\_.

**LIST ANY PROFESSIONAL OR OTHER ASSOCIATIONS OF WHICH YOU ARE A MEMBER**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REASONS FOR APPPLYING:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**Please email this application and a resume to: [anne@laneworkforce.org](mailto:anne@laneworkforce.org)**

**Or mail your application to:  
Lane Workforce Partnership  
Attn: Anne Nestell  
1401 Willamette Street, Second Floor  
Eugene, OR 97401**

*Lane Workforce Partnership (LWP) is an equal opportunity employer. With 48 hours of notice, auxiliary aids and services, and alternate formats are available to individuals with limited English proficiency free of cost. Requests can be made directly to LWP or with the assistance of TTY: Oregon Relay Services at 1-800-735-2900.*



## **Workforce Innovation and Opportunity Act CONFLICT OF INTEREST POLICY**

The purpose of this Policy is to ensure that individuals or representatives of organizations entrusted with public funds will not personally or professionally benefit from the award or expenditure of such funds. This policy governs the activities of the Lane Workforce Partnership board members, council members, task force and committee members (together "LWP Members").

It is expected that conflicts of interest will arise and this policy is intended to provide a framework that will allow the work of LWP to be achieved without the fact of or the appearance of impropriety.

This policy is intended to assure compliance with WIOA 2 CFR §200.112.

### **A. Attestations**

LWP Members shall avoid conflict of interest, real or apparent, by observing the following requirements:

Each LWP Member, and any LWP Member applicant, shall sign an Attestation denoting that the Conflict of Interest Policy has been read, understood, and that the individual pledges to conduct him/herself in accordance with such these policies and procedures. Each LWP Member must also provide a disclosure of potential conflicts created by his or her position(s) in relationship to LWP.

### **B. Misuse of Information**

No LWP Member shall use his or her position, or the knowledge obtained from his or her position, in such a manner that conflicts with the interest of LWP or results in personal gain to the LWP Member, or a third party that the LWP Member is employed by, has a fiduciary relationship with, or to whom the LWP Member provides services, where that information is not available to the public at large, nor divulge such information in advance of the time presented for its authorized release.

### **C. Conflicts of Interest**

The following are deemed conflicts of interest that create a duty of the LWP Member to fully disclose such interest immediately:

1. He or she has a significant personal financial interest in a proposed transaction involving LWP.
2. He or she is employed by, or is Trustee, Director, or Officer of any individual, organization or entity that shall have a financial interest in a proposed transaction involving LWP.
3. He or she represents a third party either through personal, professional, or confidential relationship, and such party has a financial interest in a proposed transaction involving LWP.
4. No LWP Member shall solicit or accept gratuities or favors from suppliers or potential suppliers, including subcontractors.

5. No LWP Member shall participate in the selection, award, or administration of a procurement supported by funds under LWP's jurisdiction where, to the individual's knowledge, any of the following has a financial or substantial interest in any organization which may be considered for an award:
  - a. the officer, employee, agent or LWP Member;
  - b. any Member of his or her immediate family;
  - c. his or her partner, or;
  - d. a person or organization which employs, or is about to employ, any of the above.

#### **D. Acknowledging a Conflict**

In the event that a LWP Member has an interest, directly or indirectly, in a business entity that would have a direct monetary effect due to any official action taken by LWP, the LWP Member shall declare, prior to any discussion on the matter of interest, the nature and extent of the interest and shall not voluntarily discuss the proposed LWP action. The LWP Member must excuse him/herself prior to the decision-making portion of the discussion and must refrain from casting any vote on the matter in question. The decision making process has started once a motion is made and seconded. This limitation on discussion shall not prohibit the LWP Member from providing factual information in response to direct questions concerning the matter from other LWP Members. The disclosure shall be reflected in the minutes of the meeting in which the disclosure occurred. In the case of review of proposals, the affected Member may only participate in any presentation, discussion, or response to questions regarding the proposal to the extent that competing bidders are afforded the same opportunity.

#### **E. Violation of Conflict of Interest Policy**

If an award of funding is made with a LWP Member violating the requirements of this procedure, the LWP Board of Directors is empowered to immediately suspend the obligation; the suspension subject to review at the next regular or special meeting of the LWP Board of Directors. The balance of the Board of Directors, excluding any LWP Member with potential conflict, will then determine what final corrective actions are necessary; actions that could include removal of a LWP Member, suspension of the obligation, termination of the obligation, or civil action to recover any monetary damages.

#### **F. Gifts, Favors, and Gratuities**

No LWP Member shall solicit or accept gratuities, favors, or anything of monetary value from contractors, potential contractors, or parties to subcontracts. This prohibition shall not apply to unsolicited trivial benefits, not to exceed a value of fifty dollars (\$50) that are incidental to personal, professional, or business contacts and that do not involve a substantial risk of undermining official impartiality.



## Workforce Innovation and Opportunity Act CONFLICT OF INTEREST POLICY

### ATTESTATION

I do hereby attest and affirm that I have received, read and understand the Lane Workforce Partnership (LWP) Conflict of Interest Policy and agree to be bound by it. I will promptly inform the LWP Board Chair of any material change that develops in the information contained herein.

I am a (select all that apply):

- Board Member of Lane Workforce Partnership
- Council Member of Lane Workforce Council
- Committee or Task Force Member of Lane Workforce Partnership
- I have no conflicts(s) to disclose. The below list is not exhaustive, but if any of these reasons for a conflict arise I will immediately inform the Board Chair of a conflict of interest:
  - I represent a private sector employer that has current business/contractual dealings with LWP or one or more of the WIOA or federally funded service providers
  - I have a family member who is employed by a current or potential WIOA or federally funded service provided or by another organization that provides services direction to LWP.
  - I represent a WIOA-funded service provider/contractor
  - I represent a One-Stop Operator
  - I represent a One-Stop Partner

*I promise and attest that I will hereby declare before a vote or discussion on the matter, the nature and extent of a conflict of interest. I will hereby voluntarily withhold from participating in any discussion pertaining to this matter and abstain from voting on the subject. I further understand that this shall not prohibit me from responding to any direct questions on the matter from other LWP Members.*

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Print Name

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Organization and Title

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Signature

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Date