PROGRAM CYCLE





DISCLOSURE OF REAL OR POTENTIAL CONFLICT OF INTEREST FOR EXTERNAL EVALUATIONS

This document includes a template for disclosure of real or potential conflict of interest for USAID external evaluations and instructions.

Instructions

Evaluations of USAID activities will be undertaken so that they are not subject to the perception or reality of biased measurement or reporting due to conflict of interest. For external evaluations, all external evaluation team leaders and team members will provide a signed statement attesting to a lack of conflict of interest or describing an existing conflict of interest relative to the activity being evaluated. USAID employees who participate as a team member on an external evaluation should not complete this form.

Evaluators of USAID activities have a responsibility to maintain independence so that opinions, conclusions, judgments, and recommendations will be impartial and will be viewed as impartial by third parties. External evaluators and evaluation team members are to disclose all relevant facts regarding real or potential conflicts of interest that could lead reasonable third parties with knowledge of the relevant facts and circumstances to conclude that the evaluator or evaluation team member is not able to maintain independence and, thus, is not capable of exercising objective and impartial judgment on all issues associated with conducting and reporting the work. Operating Unit leadership, in close consultation with the Contracting Officer, will determine whether the real or potential conflict of interest is one that should disqualify an individual from the evaluation team or require recusal by that individual from evaluating certain aspects of the activity(s).

In addition, if evaluation team members gain access to proprietary information of other companies in the process of conducting the evaluation, then they must agree with the other companies to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished.³

¹ USAID Evaluation Policy; USAID Contract Information Bulletin 99-17; and Federal Acquisition Regulations (FAR) Part 9.5, Organizational Conflicts of Interest, and Subpart 3.10, Contractor Code of Business Ethics and Conduct.

² USAID Evaluation Policy

³ FAR 9.505-4(b)

REAL OR POTENTIAL CONFLICTS OF INTEREST MAY INCLUDE, BUT ARE NOT LIMITED TO:

- I. Immediate family or close family member who is an employee of the USAID operating unit managing the activity(s) being evaluated or the implementing organization(s) whose activity(s) are being evaluated.
- 2. Financial interest that is direct, or is significant/material though indirect, in the implementing organization(s) whose activities are being evaluated or in the outcome of the evaluation.
- Current or previous direct or significant/material though indirect experience with the
 activities being evaluated, including involvement in the activity design or previous iterations
 of the activity.
- 4. Current or previous work experience or seeking employment with the USAID operating unit managing the evaluation or the implementing organization(s) whose activity(s) are being evaluated.
- 5. Current or previous work experience with an organization that may be seen as an industry competitor with the implementing organization(s) whose activity(s) are being evaluated.
- 6. Preconceived ideas toward individuals, groups, organizations, or objectives of the particular activities and organizations being evaluated that could bias the evaluation.

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 0412-0628. Public reporting for this collection of information is estimated to be approximately 15 minutes.

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OMB Number 0412-0628 Expiration Date: 04/30/2027

TEMPLATE: USAID Disclosure of Real or Potential Conflict of Interest for External Evaluation Team Members

Name	
Title	
Organization	
Evaluation Position	☐ Team Leader
	☐ Team member
Evaluation Award Number	
(contract or other instrument)	
USAID Activity(s)	
Evaluated (Include activity	
name(s), implementer name(s)	
and award number(s), if applicable)	
αρριταυις)	
I have real or potential	□Yes
conflicts of interest to	□No
disclose.	
If yes answered above, I	
disclose the following facts:	
Real or potential conflicts of	
interest may include, but are not	
limited to:	
1. Close family member who is	
an employee of the USAID operating unit managing the	
activity(s) being evaluated or	
the implementing	
organization(s) whose	
activity(s) are being evaluated.	
2. Financial interest that is direct,	
or is significant though indirect, in the implementing	
organization(s) whose	

	activities are being evaluated	
	or in the outcome of the	
	evaluation.	
3.	Current or previous direct or	
	significant though indirect	
	experience with the activity(s)	
	being evaluated, including	
	involvement in the activity	
	design or previous iterations	
	of the activity.	
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	JITTINGED	
If y	ves answered above, I	
dis	close the following facts:	
	_	
Real or potential conflicts of		
interest may include, but are not		
lim	ited to:	
4.	Current or previous work	
	experience or seeking	
	employment with the USAID	
	operating unit managing the	
	evaluation or the implementing	
	organization(s) whose	
	activity(s) are being evaluated.	
5.	Current or previous work	
	experience with an	
	organization that may be seen	
	as an industry competitor with	
	the implementing	
	organization(s) whose	
	activity(s) are being evaluated.	
6.	Preconceived ideas toward	
	individuals, groups,	
	organizations, or objectives of	
	the particular activities and	
	organizations being evaluated	
	that could bias the evaluation.	

I certify (I) that I have completed this disclosure form fully and to the best of my ability and (2) that I will update this disclosure form promptly if relevant circumstances change. If I gain access to proprietary information of other companies, then I agree to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished.

[Type here]

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Date	
Signature	