

# Local Workforce Development Board Chief Elected Official Conflict of Interest Attestation Form Instructions

Chief Elected Officials (CEOs) shall not appoint an individual to serve on a Local WDB if he or she has an ownership interest in or is employed by an organization that receives money under the direct control of the Local WDB, or if the individual engages in any other activity that creates a conflict of interest or what would appear to a reasonable person to be a conflict of interest.

## Exception

An individual who has an interest in or is employed by an entity that receives money under the partial or complete control of the Local WDB may be appointed to, or continue to serve, on the board if the individual does not hold a policymaking position with the entity and would not receive other than a remote or incidental benefit from the board's decisions.

This exception applies to allow Local WDB representation from entities such as a training provider that enrolls students with tuition paid from funds under the control of the Local WDB, a government agency from which representation is required, and an employer that accepts compensation for the extraordinary costs of providing work-based training from funds under the Local WDBs control.

## Conflict of Interest Attestation Form

The Conflict of Interest Attestation Form must be signed by the CEO and submitted to Iowa Workforce Development by June 1st of the certification year to ensure certification of the Local WDB. The form is an attestation that a conflict of interest does not exist in regard to all WDB members.

## Legal References

- [WIOA sec. 107\(c\)](#)
- [WIOA sec. 107\(h\)](#)



**IOWA** State Workforce  
Development Board

## Local Workforce Development Board Chief Elected Official Conflict of Interest Attestation Form

Local Workforce Development Area: \_\_\_\_\_

I, the undersigned, do attest that a conflict of interest does not exist between my individual interests and my ability to make unbiased decisions while serving as a Chief Elected Official of the Local Workforce Development Board.

If a conflict of interest arises between my individual interests and duties as Chief Elected Official, I will acknowledge, disclose and act according to Local Workforce Development Board By-Laws for such conflicts.

I am aware of the conflict of interest policies that apply to Local Workforce Development Board Members, and I attest that I have/will follow these policies when exercising my authority to appoint an individual to serve on a Local Workforce Development Board.

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Chief Elected Official's Printed Name

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Chief Elected Official's Signature

Date

Submit completed copy to:

[WIOAgovernance@iwd.iowa.gov](mailto:WIOAgovernance@iwd.iowa.gov)

### Legal References

- [WIOA sec. 107\(c\)](#)
- [WIOA sec. 107\(h\)](#)