



## CONFLICTING INTERESTS CERTIFICATION FOR PROPRIETARY SCHOOLS

(Under Chapters 30, 31, 32, and 35, Title 38, U.S.C.; Chapters 1606 and 1607, Title 10, U.S.C.;  
 Sections 901 or 903 of Public Law 96-342, National Call to Service Provision of Public Law 107-314  
 and the Omnibus Diplomatic Security and Antiterrorism Act of 1986)

Privacy Act Notice: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses as identified in the VA system of records, 58VA21/22, Compensation, Pension, Education and Rehabilitation Records - VA, and published in the Federal Register. An example of a routine use allows VA to send educational forms or letters with a veteran's identifying information to the veteran's school or training establishment to (1) assist the veteran in the completion of claims forms or (2) for VA to obtain further information as may be necessary from the school for VA to properly process the veteran's education claim or to monitor his or her progress during training. Your obligation to respond is required to obtain or retain benefits. We cannot pay education benefits to any person training at your school until we receive this information (38 U.S.C. 3683). Your responses are confidential (38 U.S.C. 5701). Any information provided by applicants, recipients, and others may be subject to verification through computer matching programs with other agencies.

Respondent Burden: We need this information to approve courses at your school for VA purposes and pay education benefits to trainees at your facility. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 10 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA](http://www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA). If desired, you can call 1-888-GI-BILL-1 (1-888-442-4551) to get information on where to send comments or suggestions about this form.

NAME AND ADDRESS OF INSTITUTION

PURPOSE: This form informs individuals that the law has restrictions concerning any potential conflict of interest. (See certifications (1) and (2) below).

### (1) PROPRIETARY PROFIT SCHOOLS ONLY

The law prohibits employees of the Department of Veterans Affairs (VA) and the State approving agency (SAA) from owning any interest in an educational institution operated for profit. In addition, the law prohibits these employees from receiving any wages, salary, dividends, gifts, or services from private profit schools. These provisions may be waived if VA determines that no detriment will result to the government, or to veterans or eligible persons enrolled (38 U.S.C. 3683). Please list below those VA and SAA employees known by you who may have a potential conflict of interest under this provision. If there are none, please enter the word "none."

| NAME AND TITLE OF EMPLOYEES(S) | DESCRIPTION OF ASSOCIATION WITH SCHOOL |
|--------------------------------|--|
|                                |  |

### (2) ALL PROPRIETARY SCHOOLS

Title 38 CFR 21.4202(c) prohibits the payment of educational assistance to any veteran or eligible person based on an enrollment in any proprietary school of which the veteran or eligible person is an official authorized to sign certificates of enrollment or verifications/certifications of attendance, an owner or an officer. Please list below the names and VA file numbers (claim or Social Security Numbers) of any certifying officials, owners or officers of your school who receive VA educational assistance based on an enrollment in your school. If there are none, please enter the word "none."

| NAME AND TITLE OF EMPLOYEE(S) | VA FILE NUMBER | DATES OF ENROLLMENT WITH YOUR SCHOOL |    |
|-------------------------------|----------------|--------------------------------------|----|
|                               |                | FROM                                 | TO |
|                               |                |                                      |    |

**CERTIFICATION: I DO HEREBY CERTIFY** that the entries above are true and correct to the best of my knowledge. I agree to immediately notify VA of any potential violations of the above prohibitions.

| SIGNATURE OF PRESIDENT OR CHIEF ADMINISTRATIVE OFFICIAL OF SCHOOL | TITLE | DATE |
|---|-------|------|
|   |       |      |