March 28, 2011

DISCLOSURE OF INTEREST AND CONFIDENTIALITY STATEMENT

To: Carolyn Glenn, Chair, Georgia Perimeter College Foundation

From: __________________________, Trustee, Georgia Perimeter College Foundation

According to the Georgia Perimeter College Foundation by-laws

“As soon as duality of interests or possible conflicts or interest on the part of any member of the Board of Trustees is known, or reasonably should have been known, any such conflict shall be disclosed to the Board of Trustees and made a matter of record. Action by the Board of Trustees in connection with such interest shall also be disclosed in writing and made a matter of record.

Any member of the Board of Trustees having a duality of interest or possible conflict of interest on any matter shall not vote or use his or her personal influence on the matter whenever such duality or possible conflict of interest shall arise.

The minutes of that meeting shall reflect that the conflict was disclosed; the party, who is the subject of the conflict, abstained from voting on the matter; and a quorum was present.

If requested by a majority of the Board of Trustees, the foregoing requirements shall not be construed as preventing the member who is the subject of the conflict from briefly stating his or her position in the matter, nor from answering pertinent questions from other members of the Board of Trustees since his or her knowledge may be of assistance”.

As a Foundation Trustee, my company/organization does not do any business with Georgia Perimeter College or the Georgia Perimeter College Foundation. I am initializing here to indicate as such. __________

As a Foundation Trustee, my company/organization does conduct business with Georgia Perimeter College and/or the Georgia Perimeter College Foundation. Those relationships and their nature are listed below:
1. Name: ___________________________________________________________
   Address: __________________________________________________________
   Profession, Business or Occupation: ____________________________________
   Principal Employer or Firm: __________________________________________
   Title or Position: ___________________________________________________

2. Identify any business relationships, transactions or contracts between the Foundation and
   yourself or any Related Person in which you or such Related Person have a substantial
   interest.

3. Identify and list any other activities in which you or a Related Person are engaged that
   may constitute a Covered Person’s Conflicting Interest Transaction as to the Foundation.

4. Identify the monetary value to you or any Related Person resulting from the relationships,
   transactions, contracts, or activities listed in response to paragraphs 2 and 3 above.

**CONFIDENTIALITY STATEMENT**

I hereby acknowledge that, as a Trustee of the Georgia perimeter College Foundation, I have
access to non-public information of the Foundation, including, but not limited to, information
relating to the Foundation’s finances, business plans, policies, and other proprietary information
(collectively, “Confidential Information”). I further acknowledge that the Foundation at all times
is and will remain the owner of the Confidential Information, and I hereby agree, consistent with
the manner in which the Foundation protects its Confidential Information, to preserve the
confidentiality of all such Confidential Information. I hereby certify that I have not used the
Confidential Information for my own or any Related Person’s benefit and that I have not
disclosed Confidential Information to any third party without the written consent of the
Foundation.

Further, I hereby agree that I will not use the Confidential Information for my own or any
Related Person’s benefit and that I will not disclose Confidential Information to any third party.

By the execution of this Disclosure of Interest and Confidentiality Statement, I hereby certify
that I have received and read a copy of the Georgia Perimeter College Foundation’s By-laws and
will abide by its terms; to the best of my knowledge, the foregoing information is complete and
accurate; and I will promptly report to the Chair of the Foundation any circumstance in the future
that may cause the information provided herein to be incomplete or inaccurate. All capitalized
terms not defined herein shall have the meaning ascribed thereto in the Policy.

_________________________________________          _____________
Signature                                              Date