



Employee and Organizational Development
Mail Code 206-85
Pasadena, CA 91125

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Nepotism Evaluation Form

Relatives, members of the same family or household, or persons with whom the employee has a personal relationship may be considered for employment. However, there are significant restrictions on their employment in the following circumstances:

- Such employment shall not result in the appearance of or create a conflict of interest. For example, such employment will not result in a direct reporting relationship.
- No employee will seek preferential treatment or attempt to improperly influence the employment of a relative, including participating on a search committee if a relative is a candidate or providing grant funds for such employment.

Relatives are defined as any family member including but not limited to parents, spouses, domestic partners, children, brothers, sisters, in-laws, an individual with whom the employee has a significant personal relationship, any individual who is a member of the employee's household, or who cohabitates with the individual.

Please check the appropriate box(es): New Hire Change in Position Other _____

Applicant Name

Currently Employed Relative Name

Applicant Job Title

Relative Job Title

Supervisor/Manager

Supervisor/Manager

Division/Department

Division/Department

Position Type
(e.g., Regular, Temporary, Term, Occasional)

Relationship to Applicant

1. Will this employment action create a direct or indirect reporting relationship between you and the disclosed relative?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Will either party have authority or influence over employment decisions affecting the other (e.g., assignments, evaluations, promotions, timekeeping, leave approvals, or disciplinary actions)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Will your job duties and those of the disclosed relative intersect in a way that could create an actual or apparent conflict of interest (such as shared responsibilities, access to confidential information, overlapping projects, or financial oversight)?	<input type="checkbox"/> YES <input type="checkbox"/> NO

*Required: Describe what steps will be taken to minimize any actual, potential or perceived conflict of interest:

(Number any pages you attach to this statement)

I CERTIFY THAT THE INFORMATION PROVIDED IS ACCURATE TO THE BEST OF MY KNOWLEDGE. I WILL PROMPTLY REPORT ANY CHANGES INVOLVING A FAMILY OR HOUSEHOLD MEMBER AS REQUIRED BY THE INSTITUTE'S PERSONNEL MEMORANDA PM 9, SECTION 4.1. IF I OR A RELATED INDIVIDUAL CHANGE POSITIONS WHILE BOTH REMAIN EMPLOYED, I WILL SUBMIT A NEW NEPOTISM EVALUATION FORM SO THE INSTITUTE CAN REASSESS THE WORKING RELATIONSHIP TO ENSURE COMPLIANCE AND PREVENT ANY CONFLICT OF INTEREST.

Applicant Name (Print Name)

Signature

Date

Supervisor Name (Print Name)

Signature

Date

Please submit completed form to Employee and Organizational Development, eod@caltech.edu. Once finalized, a copy of the form will be sent to all involved parties and their respective supervisors.

Approved by: _____

EOD Representative

Date