

**FINANCE & ACCOUNTING**  
**DEPARTMENTAL AUTHORIZATION SECURITY ACCESS**  
*Ethics and Purchasing Certification*

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**When you've finished reading the form, enter your name, your employee ID, and the date in the respective fields. Then, print and sign the form.**  
**Fax it to F&A at 407-882-1211, or email it to F&A at [fntrain@ucf.edu](mailto:fntrain@ucf.edu).**

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Acting as an employee or agent of the University of Central Florida (UCF), I confirm that I will engage in purchasing and related activities and all other business dealings on behalf of my department/project and UCF in a manner above reproach in every respect.

I understand that transactions relating to expenditure of public funds require the highest degree of public trust to protect the interests of the university and the taxpayers of Florida.

I understand that it may be considered a breach of ethical standards to participate, either directly or indirectly, in a procurement transaction when:

- I, my spouse, children, brothers, sisters, or parents have or will have a direct financial interest of 5 percent or more in a business entity that may sell, rent, or lease to UCF any realty, goods, or services.
- A person, business, or organization with whom I, my spouse, children, brothers, sisters, or parents am employed or have/has an arrangement for prospective employment and the relationship could pose a conflict between my private duties and the best interests of the university.

I understand that if any of the above conditions exist, I must complete the HR form *Conflict of Interest/Outside Activity/Employment Report* (available on the HR website at <http://hr.ucf.edu/files/ConflictofInterest.pdf> for A&P and USPS employees or linked to your myUCF account at <https://my.ucf.edu> if a faculty member) and obtain written approval from the appropriate administrator prior to making any commitments for procurement.

I understand that failure to comply with ethical standards may result in disciplinary action up to and including termination.

I will strive to obtain the best value for the university at all times when making purchasing decisions.

I certify that I will abide by the guidelines in the Purchasing Procedure Manual at <http://www.purchasing.ucf.edu>.

I will strive to inspect the goods and services or approve the inspection of goods and services within 10 working days of receipt of goods or services to ensure prompt payment to the vendor.

**PRINTED FULL NAME:** \_\_\_\_\_ **EMPLOYEE ID:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_