

ARK-LA-TEX ACADEMY OF DENTISTRY

CONFLICT OF INTEREST STATEMENT

It is the policy of the Ark-La-Tex Academy of Dentistry that all speakers at any program sponsored by the Ark-La-Tex Academy of Dentistry shall complete a conflict of interest statement regarding any interest in a company or a product related to the program as a part of the Speaker's Agreement with the Ark-La-Tex Academy of Dentistry. Further, any portion of the following information can be shared with the membership and/or attendees to gain perspective of the program.

In accordance with this policy, I, \_\_\_\_\_, declare that I have no proprietary, financial or other personal interest of any nature or kind in any product, service, and/or company that will be discussed or considered during the proposed program.

**Indicate Any Conflicts of Interest That Apply**

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I declare that I receive monetary or special treatment from a company whose products are discussed in my seminar. Please disclose:

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I declare that I receive financial support from an outside source for 1) announcements, brochures, or other educational materials, and/or 2) the presentation itself. Please disclose:

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I declare that I receive financial support from a commercial company. Please disclose:

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I declare that I receive monetary compensation as a faculty member/instructor for a dental continuing education course I promote during my seminar. Please disclose:

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I will ensure that a balanced view of all therapeutic options is presented, and whenever possible, generic names will be used to contribute to the impartiality of the program presented. Furthermore, I understand and agree that as a condition for participating as a speaker at an Ark-La-Tex Academy of Dentistry sponsored program, I will exercise particular care that no detriment to the Ark-La-Tex Academy of Dentistry will result from conflicts between my interests and those of the Ark-La-Tex Academy of Dentistry.

Having read and understood the Ark-La-Tex Academy of Dentistry policy and having completed this statement to the best of my knowledge and belief, I agree to be bound by the terms thereof.

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Signature

Date