

State of California – Department of Fish and Wildlife
ANTI-NEPOTISM POLICY ACKNOWLEDGEMENT AND SELF-REPORTING
 DFW 1024 (NEW 01/10/18)

PART 1: (submit a separate form for each personal relationship)		
Your Name:	Classification:	
Division/Section/Program/Unit:	Manager's Name:	
Do you have a personal relationship with an employee who works in the Department?* <input type="checkbox"/> Yes – Continue to Part 2 <input type="checkbox"/> No – Skip Part 2		
Part 2: (identify the employee in which you have a personal relationship with)		
Employee Name:	Classification:	
Division/Region/Branch/Program/Unit:	This Person's Relationship to you: <input type="checkbox"/> Familial/Related <input type="checkbox"/> Close Personal	
A. Check all boxes that describe your working relationship with the other person: <input type="checkbox"/> Work in the same office or work group. <input type="checkbox"/> Work for the same first-line supervisor. <input type="checkbox"/> Work in each other's chain-of-command (any level of supervisory authority over one another). <input type="checkbox"/> Hold a position that can grant special privileges or to influence the appointment, promotion, work assignments, discipline or corrective action of the other. <input type="checkbox"/> Participate in the development and/or administration of an examination, or influence the hiring/interviewing of a person with whom they have a personal relationship. <input type="checkbox"/> None of the above – NO ACTION REQUIRED		
<i>I acknowledge I have received the CDFW Anti-Nepotism Policy. I have read this policy and understand that any CDFW employee who has a close personal relationship or a relative who works in CDFW are required to notify their supervisor/manager when working arrangements are in conflict with the policy, and all CDFW employees are required to annually complete Anti-Nepotism Policy Self Reporting Form DFW 1024.</i>		
Employee's Signature:	Print Name:	Date:
RECOMMENDATION – SUPERVISOR/MANAGER USE ONLY		
I recommend: <input type="checkbox"/> An alternate reporting relationship – memo detailing changes is attached <input type="checkbox"/> An exception – justification attached <input type="checkbox"/> No action – no violation of the Anti-Nepotism policy		
Supervisor's Signature:	Print Name:	Date:
Reg. Manager/Branch Chief/Deputy Director Signature:	Print Name:	Date:
APPROVAL - HRB USE ONLY		
HRB Chief Signature:	Print Name:	Date:
<input type="checkbox"/> APPROVE <input type="checkbox"/> DISAPPROVE – denial memo attached		

**(Personal relationships for this purpose include, but are not limited to, association by blood, adoption, marriage and/or cohabitation. Close personal relationships include: domestic partner, cohabitants, housemates, former spouse, and romantic or sexual relationships. Relatives include all of the following, whether by blood, marriage [step family], or adoption: father, mother, son, daughter, brother, sister, grandparent, uncle, aunt, cousin, nephew, niece, spouse, and in-laws.)*

Distribution: 1. Official Personnel File (Original) 2. Employee (copy) 3. Supervisor (copy)