

ANTI-NEPOTISM POLICY ACKNOWLEDGEMENT AND SELF-REPORTING

DFW 1024 (REV. 08/23)

A separate [Anti-Nepotism Policy Acknowledgement and Self-Reporting \(DFW 1024\)](#) form is required for each personal relationship and for each appointment. A failure to disclose a personal relationship may result in disciplinary action up to and including dismissal.

SECTION 1: CANDIDATE/EMPLOYEE INFORMATION		
<input type="checkbox"/> Reporting a personal relationship for a current appointment; OR <input type="checkbox"/> Documentation for a position applied for		
CANDIDATE/EMPLOYEE NAME:	PROGRAM:	
POSITION NUMBER:	CLASSIFICATION:	
Do you have a personal relationship with an employee who works for the California Department of Fish and Wildlife (CDFW)? <input type="checkbox"/> Yes – continue to Section 2 <input type="checkbox"/> No – continue to Section 3	Personal relationships for this purpose are defined as persons related by blood, adoption, current or former marriage, domestic partnership, or cohabitation. Cohabitation means living with another person while in a romantic relationship without being married or in a domestic partnership. Examples of personal relationships include but are not limited to 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.	
SECTION 2: PERSONAL RELATIONSHIP INFORMATION		
CDFW employee's name with whom you have a personal relationship:	Describe the nature of your personal relationship with the employee:	
Employee's Classification:	Employee's Program:	
Check all boxes that describe your current or potential working relationship with the employee: <input type="checkbox"/> Work in the same office or work group* <input type="checkbox"/> Work for the same first-line manager/supervisor* <input type="checkbox"/> Work in each other's chain-of-command (any level of supervision 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 I have a personal relationship* <input type="checkbox"/> None of the above		
*Requires additional action to be taken to ensure there is no violation to the Anti-Nepotism Policy. At a minimum, a justification explaining the exception must be submitted.		
SECTION 3: CANDIDATE/EMPLOYEE SIGNATURE		
With accordance to California Civil Code §1633.5(b) , I acknowledge that by providing my electronic signature for this form, I agree that my electronic signature is legal binding equivalent to a handwriting signature. I hereby confirm that my electronic signature represents my execution or authentication of this form, and my intent to be bound by it.		
I acknowledge that I have received the Anti-Nepotism Policy . Furthermore, I acknowledge that I must notify my manager/supervisor if I have or later learn that I have a personal relationship with any employee working for CDFW. I certify that the information reported on this form is accurate.		
Candidate/Employee Signature:		Date:
SECTION 4: MANAGER/SUPERVISOR		
I recommend: <input type="checkbox"/> No action required; or <input type="checkbox"/> *Recommended action: <input type="checkbox"/> Exception – justification required <input type="checkbox"/> Alternate reporting relationship – details required	Recommended action justification/details (attach a separate document if additional space is required):	
Manager/Supervisor Signature:	Print Name:	Date:
Branch/Regional Manager or Deputy Director Signature:	Print Name:	Date:
SECTION 5: HUMAN RESOURCES		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied – memo attached	Comments:	
Human Resources Designee Signature:	Print Name:	Date: