

DISCLOSURE OF CLOSE RELATIVES FORM - Statewide

DHR-STW-Form #: DHR-STW-221.1-F	Authority: 29 Del. C. c. 58; Merit Rule 12
Effective Date: February 26, 2024	Supersedes: N/A

I have read and acknowledge that I am familiar with, understand, and will comply with the Anti-Nepotism Policy of the State of Delaware. I acknowledge that I am required to disclose any of my close relatives that I am aware of employed by the State of Delaware Agency where I am applying or employed. A close relative is defined as a familial connection between persons by blood, marriage, adoption, and domestic partnership. It is further defined as spouse, domestic partner, parent, stepparent, child, stepchild, grandparent, grandchild, brother, sister, half-brother, half-sister, stepbrother, stepsister, aunt, uncle, niece, nephew, or cousin of an employee or applicant. In addition, it includes mother-in-law, father-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, child, or any other person for whom the applicant or employee has assumed legal guardianship and/or carried out parental responsibilities. Close relatives of the employee’s domestic partner shall be included in this definition.

Part 1: Close Relative Information – Please attach an additional page if necessary

Name of Relative	Agency/Division

Part 2: Applicant/Employee Information

Applicant/Employee Name (Print): _____

Position: _____ Agency/Division: _____

Applicant Signature: _____ Date: _____

Part 3: Signature Section

Manager/Supervisor Date

Agency Human Resource Date

By using this form, the parties acknowledge their agreement to conduct transactions by electronic means. A party’s electronic signature for purpose of the Uniform Electronic Transactions Act, 6 Del. C. Ch. 12A may be provided by checking a box as indicated, electronic initials or name, or email confirmation.

A copy of this completed Form must be sent to the Agency Human Resources office.