

INDIANA
STATE ETHICS COMMISSION

APR 16 2019



ETHICS DISCLOSURE STATEMENT
CONFLICTS OF INTEREST – DECISIONS AND VOTING
 State Form 55860 (R / 10-15)
 OFFICE OF THE INSPECTOR GENERAL
 IC 4-2-6-9

FILED

In accordance with IC 4-2-6-9, you must file your disclosure with the State Ethics Commission no later than seven (7) days after the conduct that gives rise to the conflict. You must also include a copy of the notification provided to your agency appointing authority and ethics officer when filing this disclosure. This disclosure will be posted on the Inspector General's website.

Name (last) Ernest	Name (first) Byron	Name (middle) L.
Name of office or agency Indiana State Board of Education		Job title Board Member
Address of office (number and street) 143 West Market Street		City Indianapolis
Office telephone number (317) 232-2000		ZIP code 46204
Office e-mail address (required) bernest@sboe.in.gov		

Describe the conflict of interest:

Dr. Ernest is currently employed with a company known as Noble Education Initiative ("NEI"). The focus of this position is teacher recruitment and teacher professional development.

NEI is a Delaware not-for-profit company doing business in Florida and other states across the country. NEI provides a wide range of services including leadership, curriculum, career-tech program development, in addition to classroom and grant management, data analysis, auditing/evaluation, eight step process implementation and full school operations.

During the April 10, 2019, Board meeting, an agenda item labeled "Teacher Preparation Programs" was presented on the Board's consent agenda for a vote.

This agenda item included several programs, including one identified as "Noble Education Initiative (NEI)-Transition to Teaching."

Due to Dr. Ernest's affiliation with NEI, when the Board reached the consent agenda vote during the meeting, Dr. Ernest recused himself from voting on this item.

Describe the screen established by your ethics officer: (Attach additional pages as needed.)

1. The Board's Ethics Officer shall monitor Dr. Ernest's involvement in any matter involving CSUSA or NEI to ensure that the screening procedures are followed
2. If any matter regarding CSUSA, including CSUSA's current contract, is presented to the Board for a vote or decision, Dr. Ernest will recuse himself from the vote and discussion, as well as submit an Ethics Disclosure Statement with the OIG
3. If any matter regarding NEI is presented to the Board for a vote or decision, Dr. Ernest will recuse himself from the vote and discussion, as well as submit an Ethics Disclosure Statement with OIG
4. Dr. Ernest will not be permitted access to any confidential information concerning CSUSA or NEI without the written approval of the Board's Ethics Officer
5. Board staff will screen Dr. Ernest from any and all involvement in matters involving CSUSA and NEI; further Board staff will refrain from any discussion in Dr. Ernest's presence that might be related to matters involving CSUSA or NEI
6. The involvement of Dr. Ernest on the Board and employment with NEI shall not serve as an endorsement by the Board of NEI or CSUSA
7. The Board's Ethics Officer will provide written notice to the OIG anytime the screening procedures are implemented
8. These screening procedures shall remain in place for the duration of Dr. Ernest's employment with NEI and his service as a Board member

All aspects of the screening process were adhered to by Dr. Ernest and the Board's Ethics Officer.

AFFIRMATION

Your signature below affirms that your disclosures on this form are true, complete, and correct to the best of your knowledge and belief. In addition to this form, you have attached a copy of your written disclosure to your agency appointing authority and ethics officer.

Signature of state officer, employee or special state appointee

Date signed (month, day, year)

Printed full name of state officer, employee or special state appointee

Dr. Byron L. Ernest

FOR ETHICS OFFICER USE ONLY

Your signature below affirms that you have reviewed this disclosure form and that it is true, complete, and correct to the best of your knowledge and belief. You also attest that your agency has implemented the screen described above.

Signature of ethics officer

Date signed (month, day, year)

Printed full name of ethics officer

Timothy A. Schultz

Schultz, Timothy A

From: Dr. Byron L. Ernest <byronernest10@gmail.com>
Sent: Tuesday, April 16, 2019 12:44 PM
To: Schultz, Timothy A
Cc: Kwiatkowski, Lee A (GOV)
Subject: Recusal

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

Tim,

I will be recusing myself from item K.v. of the consent agenda for the April 10, 2019 State Board Of Education meeting.

Positively,

Byron

Dr. Byron L. Ernest