

Existing Relationship Disclosure Form

DCSF MO-2023-131A

In accordance with Mayor’s Order 2023-131, all District government employees must disclose their involvement in any existing prohibited or potentially conflictual dating, romantic or sexual relationships. Employees must disclose a relationship when:

1. They are a participant in any of the following prohibited relationships:
 - a. A relationship between a supervisor and a supervisee in the “chain of command” (this includes supervision that is direct, indirect, operational, or situation);
 - b. A relationship between an employee and a trainee and intern within the same agency; and
 - c. A relationship prohibited by professional codes (e.g., doctor/patient, lawyer/client, social worker/client, etc.);
2. They are a participant in a relationship where there is reasonable likelihood that someone would raise a credible charge of preferential treatment (past, present, or future); or
3. Any time a promotion, reorganization, or restructuring causes a relationship to fall into a prohibited status.

Please complete this form to acknowledge the existence of your relationship and submit the executed copy to your agency disclosure designee.

DISCLOSING EMPLOYEE INFORMATION		
Employee First Name	Employee Last Name	
Agency		
Position Title		
Agency Branch/Division		
SECOND DISCLOSING EMPLOYEE INFORMATION (RELATIONSHIP WITH)		
Employee First Name	Employee Last Name	
Position Title		
Agency Branch/Division		
RELATIONSHIP CATEGORY (Check One)		
<input type="checkbox"/> A prohibited relationship as defined by Mayor’s Order 2023-131.	<input type="checkbox"/> A relationship where someone could raise a credible charge of preferential treatment.	<input type="checkbox"/> A relationship that is now prohibited due to a promotion or reorganization.
EMPLOYEE ACKNOWLEDGEMENTS		
By signing this document, I disclose, understand, and agree to the following: <ul style="list-style-type: none"> • I am participating in a voluntary and consensual relationship with the other employee named in this document. • We are both free to end the relationship at any time. • If this consensual relationship is prohibited as a result of the Mayor’s Order, I am committed to finding a resolution. • Should I seek to file a sexual harassment claim, I am aware that I can do so and how. • I have received, read, and understand Mayor’s Order 2023-131 Updated District Government Sexual Harassment Policy, Guidance, and Procedures 		
SIGNATURE OF DISCLOSING EMPLOYEE		
Sign	Date	
SIGNATURE OF SECOND DISCLOSING EMPLOYEE		
Sign	Date	

----- AGENCY DESIGNEE COMPLETE BELOW -----

AGENCY DISCLOSURE DESIGNEE INFORMATION		
Employee First Name	Employee Last Name	Position Title
AGENCY DISCLOSURE DESIGNEE ACKNOWLEDGEMENT		
I certify receipt of a fully executed consensual relationship disclosure form.		
Sign	Date	