



Staff Conflict of Interest Disclosure Form

In accordance with the University and UniServices' Conflict of Interest Policy, all staff members of the University or UniServices must disclose any actual, potential or perceived conflict of interest.

The completed form is to be submitted by the manager to the Conflict of Interest register.

PART A: Nature of conflicts

Outline the actual, potential or perceived conflict of interest.

PART B: Proposed action(s) agreed by staff member and manager

Outline what action(s) is proposed to resolve the conflict or reduce the risks it may pose to the individual's duties, and/or to the University or UniServices.

(Please consider whether a more senior manager may need to be consulted)

I declare that the disclosure in Part A is true and correct and that I agree to the action plan outlined in Part B.

Staff member name		Staff member Signature	
Department		Date	

I approve the action plan outlined in Part B.

Manager name		Manager Signature	
Position		Date	

Office use only

Col register ID		Date	
Entered by name		Position	