

## Conflict of Interest Declaration Form

Section 1: Employee	
To be completed by employees without an e number	
Employee name	Staff ID
Role/title	College/Department
RMIT employer	Type of conflict
Nature of conflict	Date conflict reported
Conflict description	How will this conflict be managed?
Employee Declaration:	
☐ I declare that the above information is true to the be	est of my knowledge and I confirm that:
<ul> <li>I have discussed the situation with my manage</li> <li>I will take appropriate steps to adequately maninterest in accordance with the RMIT Conflict of</li> <li>even if a situation has been approved using the acting in a manner which gives rise to an actual</li> <li>I will keep my manager informed of any material reconfirm my position annually.</li> </ul>	age the actual, potential or perceived conflict of f Interest Policy e Conflict of Interest Policy, I will refrain from I, perceived or potential conflict of interest
Additional comments	Attachments

Manager name (if known)

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## Section 2: Manager or approved delegate

By selecting approve you acknowledge that:

- you have discussed the declaration with your direct report
- where required, a treatment plan has been put in place to manage and review the conflict of interest in accordance with the Conflict of Interest Policy and Procedure
- where required, you have sought confidential advice from your line manager or HR business partner.

If you are not satisfied that enough detail has been provided, you may reject the application and request further information.

Outcome	Date
Name	Signature
Role/title	
Comments	

Please forward completed form to Human Resources.

This form will be stored on the personnel file.