



Personnel Licensing

FSS PEL G03

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DECLARATION OF CONFLICT OF INTEREST

I, [insert full names] _____ herewith declare the following real, potential, perceived or apparent conflict of interest with respect to carrying out my duties as a [insert title] _____:

ASPECT OF CONFLICT	DESCRIPTION/CLARIFICATION
• Level of financial interest in the company;	
• Direct involvement in company ownership;	
• Owning a substantial number of voting shares of the company;	
• Family ties with company owners;	
• Privileges/favours which could bias one's ability to conduct duties	
• Other conflicting situation	

Signature of Applicant		Date:	
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Review by the Senior Manager: Personnel Licensing

Decision made	ASI/OFE may proceed with allocated duties		
	ASI/OFE to be replaced with alternative ASI/OFE		
	ASI/OFE to be accompanied to ensure fairness		
Name: Senior Manager PEL			
Signature: Senior Manager PEL		Date	