**Conflict of Interest Disclosure Form**

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| --- | --- | --- | --- |
| **Campaign Title** |  | **Campaign reference number** |  |

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| --- | --- | --- | --- |
| **Selection Board member name** |  | **Selection Board member** **job title** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Candidate name** |  | **Candidate number** |  |

A conflict of interest is a situation in which someone in a position of trust has competing professional or personal interests. These competing interests can make it difficult to fulfil their duties impartially. A conflict of interest exists even if no unethical or improper act results from it.

As a Selection Board member, there is a conflict of interest if one or more of the following scenarios apply to you:

|  |  |
| --- | --- |
| **Conflict of Interest** | **Yes**  **(Please tick appropriate box)** |
| I am a family member / relative of an applicant for the above campaign |  |
| I am aware of or involved in a Dignity at Work related incident regarding an applicant for the above campaign |  |
| I am aware of, or involved in, a Disciplinary Procedure / Investigation regarding an applicant for the above campaign |  |
| Other (please provide details below) |  |

Please note that information provided on this form is strictly confidential and is solely for use by

HR/Recruiter representative.

**This form should be completed and returned before the selection event takes place. Failure to return the completed form before the event will result in the event being cancelled.**   
 **It is your responsibility to notify HR / Recruiter representative should a conflict of interest arise after this form has been submitted.**

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\\_\_\_\_\_\_\_\\_\_\_\_\_

**Office Use Only*:***

**Form Reviewed by**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\\_\_\_\_\_\_\_\\_\_\_\_\_

**Recommendation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_