

# Conflict of Interest Compliance Form

Full Name

Position/Title

Department/Organization

Email Address

## Disclosure of Interests

Please disclose any personal, financial, or professional interests that could potentially result in a conflict of interest with your position or responsibilities:

## Declaration

I hereby declare that the information provided above is accurate and complete to the best of my knowledge. I agree to promptly disclose any future situations that may give rise to a conflict of interest. I acknowledge that failure to comply with the conflict of interest policy may result in disciplinary action.

Signature

Date

## Important Notes

- This form should be reviewed and updated annually or whenever a new potential conflict arises.
- Accurate disclosure protects both individuals and the organization from legal and ethical risks.
- Failure to declare conflicts of interest may result in disciplinary measures or termination.
- When in doubt, disclose: transparency is always encouraged.
- Further clarification should be sought from the Compliance or HR department if needed.