## **Conflict of Interest Disclosure Form**

Full name				
Job role				
Centre name and reference number				
Centre co-ordinator				
Centre address				
Centre telephone number				
Centre email				
	I have no conflict of interest to report			

Information for declaration must include the following:

- The type of interest
- The nature of the interest
- A description of all personnel involved in the interest, financial or non-financial and/or any other relevant information (e.g name of learner).

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest between Safety Training Awards centres and your personal interests, financial or otherwise:

Please refer to the Conflict of Interest Policy for more information.

I have the following conflict of interest to report

Declaration		

l ackn	owledge	that the	above	interests	exist	and to	the bes	st of my	knowledge	I have i	informed
Safety	/ Training	g Award	s with a	all the rel	evant i	nforma	ition re	lating to	o the conflic	t of inte	erest.

Print name		Signature					
Date							
		· 					
Review by Safety Training Awards Compliance Manager (if applicable):  Action to be taken to minimise Conflict of Interest:							
Drint name		Cignoture					
Print name		Signature					
Date							