

CONFLICT OF INTEREST DECLARATION

Directors, Officeholders and Committee Members representing the interests of The Australasian College of Phlebology (ACP)

The purpose of this declaration is to discover any pecuniary or non-pecuniary interest of an ACP Director, Office holder and Committee Member which is in conflict, has the potential to be in conflict, or might be perceived to be in conflict with their responsibility to act in the best interests of the College.

A declaration will be sought from each Member when joining the board, committee or in providing educational activities, but Members must also declare any new conflicts of interest that may arise during their term.

These documents will only be retained while ever a person is an ACP Director, Officer and Committee Member. The information will be available only to the Board. All usual privacy procedures will be followed to ensure the information is not released to any other party without the express consent of the individual concerned.

1. PECUNIARY or NON-PECUNIARY INTERESTS

1.1 List the names of any companies or other organisations involved in the development, marketing and education about medical administration, in which you have a pecuniary interest. List the names of any companies or other organisations that are <u>known to you</u> to be service providers to ACP or with which ACP has a service/program contract in which you have a pecuniary interest. A pecuniary interest may include any of the following:

- shareholdings
- holdings in managed funds which have a particular focus on the field of the health and/or pharmaceutical industries
- indirect or beneficial interests in a company or organisation or in a trust which holds shares or investments in such a company or organisation
- directorships, board memberships or other offices
- paid employment or contracting work, including consultancies, commissions, presentations, and advisory work, whether as an individual or on behalf of another organisation or person
- funding for research or education
- grants for travel or conference expenses.

1.2 PROFESSIONAL INTERESTS

List the names of any companies or other organisations involved in the development, marketing, evaluation and education about medical administration in which you have a professional involvement. List the names of companies or other organisations which are service providers to ACP or with which ACP has a service/program contractual relationship. Interests may include involvement in:

- research and development
- directorships or advisory groups
- consulting
- investigations or evaluations
- other committees, associations

DECLARATION

I acknowledge that my attention has been drawn to the Confidentiality and Declaration of Interest Policy for Directors of the Australasian College of Phlebology attached to this form, and I agree to abide by those principles.

I agree to abide by the Code of Conduct of The Australasian College of Phlebology.

I declare the following pecuniary and professional interests:

ORGANISATION	TYPE OF INTEREST	INTEREST HELD BY
NAME		
SIGNATURE		

DATE _____

Please return your Declaration of Interests Form to the Executive Manager on acp@phlebology.com.au