

**Conflict of Interest / Other Employment Management Plan**

THIS FORM MUST BE LODGED WITH YOUR MINISTER (THROUGH YOUR CHIEF OF STAFF)

Personal Details	
<b>Name:</b>	
<b>Ministerial Office</b>	
<b>Date of Declaration:</b>	
Conflict of interest or other employment details	
<b>Details of personal interest or other employment</b>	<p><i>This form is to be used where personal interests of a staff member has the potential to conflict with the staff member's official duties.</i></p> <p><i>The following detail should be provided in relation to other employment:</i></p> <ul style="list-style-type: none"> <li>• <i>Name and location of employer</i></li> <li>• <i>Duration of employment</i></li> <li>• <i>Proposed hours of work</i></li> <li>• <i>Duties to be undertaken</i></li> </ul>
<b>How does the personal interest or other employment have the potential to conflict with the staff member's public duties?</b>	<i>This should be a short statement about how the personal interest/other employment could conflict with the staff member's responsibilities</i>
<b>Management Actions to respond to the conflict</b>	<i>Outline management actions required to address any conflict of interest</i>
<b>Integrity Commissioner Consulted?</b>	<i>Yes / No</i>
Staff member's certification	
I declare that the above details are correct to the best of my knowledge.	
_____	_____/_____/_____ <b>Date</b>
<b>Signature</b>	
Chief of Staff certification <i>(not required for a Chief of Staff Conflict of Interest/Other Employment Management Plan)</i>	
I certify receipt of the Conflict of Interest/Other Employment Management Plan	
_____	_____/_____/_____ <b>Date</b>
<b>Signature</b>	
Minister's certification	
I certify receipt of the Conflict of Interest/Other Employment Management Plan	
_____	_____/_____/_____ <b>Date</b>
<b>Minister</b>	<b>Signature</b>