# APPENDIX 1: Declaration of Interests of Members, Trustees, Governors and Senior Employees

Name: ……………………………………………………………………..

Position: ……………………………………………………………………………………

I confirm that I have read and understood the Conflicts of Interests Policy for Members, Trustees, Governors and senior employees

I set out below, under the appropriate headings, my interests which are required to be declared under the Conflicts of Interests Policy.

I have stated ‘none’ where I have no such interests under a heading. A zero return is required.

1. **Pecuniary Interests**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Business** | **Nature of Business** | **Nature of Interest** | **Date interest Began** | **Perceived Relevance** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **Pecuniary Interests of Connected Parties**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Connected Party** | **Name of Business** | **Nature of Business** | **Nature of Interest** | **Date Interest Began** | **Perceived****Relevance** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **Non-Pecuniary Interests**

|  |  |  |  |
| --- | --- | --- | --- |
| **Interest** | **Nature of Interest** | **Date interest Began** | **Perceived****Relevance** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Non-Pecuniary Interests of Connected Parties**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Connected Party** | **Interest** | **Nature of Interest** | **Date Interest Began** | **Perceived****Relevance** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

To the best of my knowledge, the above information is correct. I give my consent for it to be used for the purposes described in the Conflicts of Interests Policy, but for no other purpose.

Name: …………………………………….... Date: ……………………………

Signed: ……………………………………………… Date