**Appendix A – Declaration of Interests Form**

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| **Name and Post:** |
| **Service Area and Team:** |

Please state NONE in the box below if a nil declaration is being made.

|  |
| --- |
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |
| Action taken by line manager (please state how the conflict will be managed and what arrangements have been put in place to minimise risks): |
| I acknowledge the council policy on Conflicts of Interest - Declaring and Registering Interests and declare the above interests. I confirm that I have no other activities, responsibilities, ownership entitlements, relationships or close associations that may lead to a conflict of interest.……………………………………….. ………………………………. ………….**Signature Officer Name & Position Date**……………………………………….. ..……………………………… ………….**Signature Line Manager Name & Position Date**  |

Describe nature of conflict of interest – continue on a separate sheet, if necessary.

Note: The completed form (signed and dated by officer and line manager) should be forwarded to the Monitoring Officer, County Hall, New Road, Oxford OX1 1ND or emailed to:  governance@oxfordshire.gov.uk. **Emailed forms should be sent direct from the line manager as confirmation of authorisation**.