This form is to be used by school representative bodies, school management councils and non-NTPS school-based employees to declare actual, potential or perceived conflicts of interest.

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| NOTE: This form is not to be used by NT Public Sector (NTPS) employees – NTPS employees are to use the department’s conflict of interest portal under [eServices](https://educationnt-eserve-prod.powerappsportals.com/).[[1]](#footnote-1) |

* In accordance with the Department of Education conflict of interest policy and procedures, all employees and school bodies must disclose and manage actual, potential and perceived conflicts of interest.
* A conflict of interest arises where official duties may be influenced or seen to be influenced by their private interests, including the interests of family members.
* When completing this declaration, you are required to take into consideration the private interests and associations of your immediate family.
* Please discuss and complete this form in consultation with your line manager, school body chair, principal, or school contact, if you suspect a conflict of interest exists between your private interests and your official duties.

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|  | Questions are followed by answer fields. Use the ‘Tab’ key to navigate through. Replace Y/N or Yes/No fields with your answer. |
| Conflict of Interest Declaration | |

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| Declarant’s details | |
| Name: |  |
| Position or role: |  |
| School: |  |
| Telephone: |  |
| Email: |  |

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| Reason for identifying interest – tick all that are relevant | |
| I am a School Representative Body member  I am a School Management Council member  I am a Non-NTPS School-based employee  I am undertaking a Procurement activity  I am undertaking an Employment activity |  |

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| **Step 1: IDENTIFY interests** | | | | |  |
| Personal interests  (For SRB, SMC and non-NTPS School-based employees) | | Actual (real) conflict | Potential conflict | Perceived conflict | N/A |
|  | **Interests and associations** – private interests such as sporting, social, employment of family members in which you line manage, child attending the school you teach |  |  |  |  |
|  | **Outside Employment, appointments, or memberships,** whether paid or unpaid  Non-NTPS school-based employees only |  |  |  |  |
|  | **Employment, appointments, or memberships, whether paid or unpaid that may impact your ability on SRB or SMC** |  |  |  |  |
|  | **Real Estate** – interest in land, property or development linked to the Department of Education or the school  For example, leased to the school including principal or teacher residences or asset used in-kind |  |  |  |  |
|  | **Shareholdings or other interest in a company or business**, providing services to the Department of Education or schools  Large corporates like Telstra are exempt |  |  |  |  |
|  | **Local Government office** –a local government office held  for example, council member where decisions could be made affecting a school  Please provide a summary of responsibilities |  |  |  |  |
|  | **Other – please specify**  For example, for employment or Procurement activities |  |  |  |  |

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| **Step 2: Based on Step 1, do you have a conflict of interest to declare?** |
| Yes  No |
| If YES, complete Steps **3 and 4 and send the form to the chair for endorsing - step 5, and then obtain approval - step 6.**  If NO, then no declaration is required to be completed. |

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| Step 3: Please provide details of the type of interest/s identified at step 1. Please clearly identify where an interest belongs to a family member or other relevant person, and the relationship of that person to you.  Where there are multiple conflicts identified, number them separately. |
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| Please describe how the above identified interests may result in a situation that might affect or be seen to potentially affect you and/or the school. |
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| **Step 4: Acknowledgement** | | | | | | |
| The particulars of my private financial and other interests and associations, of which I am aware, that give or may give rise to a conflict of interest with my duties are set out above.  I acknowledge that the information disclosed by me, and my immediate family (or other relevant persons) will be held by the principal of the school.  I further acknowledge that completion of this declaration does not absolve me of my obligation to disclose any new conflict of interest and to take all reasonable steps to prevent such conflict.  I confirm that I shall complete a new declaration following any change in my interests or the interests, of which I am aware, of my immediate family (or other relevant persons) which gives, or may give, rise to a conflict of interest. | | | | | |  |
| **Name** |  | | **Date** |  | |  |
|  |  | |  |  | |  |
| **Position or role** |  | |  |  | | --- | --- | | **Signature** |  | | | | | |
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**The completed form must be forwarded to the principal of the school for a decision and record keeping.**

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| **Step 5: Principals decision** | | | | | | |
| **Approved** |  | **Go to 5A** | | | |  |
|  |  | | |  |  |  |
| **Not approved** |  | **Go to 5B** | | | | |
| **Step 5A: Approval** | | | | | | |
| ***Provide comment about how the conflict will be managed (if relevant).*** | | | | | | |
| **Step 5B: Not approved** | | | | | | |
| ***Provide comment why this is not approved.*** | | | | | | |
| **Name** |  | | | **Date** |  |  |
|  |  | | |  |  |  |
| **Position** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | | --- | --- | | **Signature** |  | | | | |

## Collection notice

The information collected in this form will only be used for the purpose for which it is being collected. All information will be treated confidentially, stored in a secure location, and destroyed in line with legislated retention and disposal schedules to ensure that everyone’s right to privacy is maintained. For more information, go to the Department of Education’s Privacy Policy, located on the Policy and Advisory Library or contact the Information Manager on ph. 8999 5960.

1. https://educationnt-eserve-prod.powerappsportals.com/ [↑](#footnote-ref-1)