

APPENDIX 1 – INTEREST DECLARATION FORM

INTEREST DECLARATION FORM (for all interests, gifts, hospitality and sponsorship)



Table with 5 columns: Name, Role, Description of Interest, Relevant Dates (From, To), and Comments. Includes an example row for Mr John Smith and two placeholder rows.

Please see below for information on how to populate the above boxes

Do / do not consent to the disclosure of this information to the public

If consent is NOT given please give reasons below:

Large empty rectangular box for providing reasons if consent is not given.

I understand that it is a serious offence to make or conspire to make any false statement on this form or to withhold any relevant information, and that such an offence could lead to disciplinary action and I may be liable for criminal prosecution and/or civil recovery proceedings. I consent to disclosure of information from this form to and by the Trust with NHS Counter Fraud Specialists for the purpose of verification, prevention, detection and prosecution of fraud.

Signed: [Signature box]

Date: [Date box]

