



Aboriginal and Torres Strait
Islander Health Practice
Chinese Medicine
Chiropractic
Dental
Medical
Medical Radiation Practice
Nursing and Midwifery
Occupational Therapy
Optometry
Osteopathy
Pharmacy
Physiotherapy
Podiatry
Psychology

Australian Health Practitioner Regulation Agency

Private and conflict interests declaration

July 2016

Confidential information

Name:

Vacancy:

Scheduled Medicines Expert Committee

Applied for appointment as: Chair Member

Instructions

This form gathers information that is essential to your application for appointment. All appointments are made by the National Board.

AHPRA treats all personal information provided by an individual in support of an application for appointment in accordance with the applicable laws, including the applicable provisions of the *Privacy Act 1988* (Cth).

The personal information you provide is needed to help assess your application. It may be shared with other persons as the completion of this form is part of the selection and appointment process. Should you wish to gain access to your personal information held by AHPRA please write to the privacy officer at the AHPRA office in your state or territory.

When you provide us with information about other individuals, we rely on you to make them aware that such information will or may be provided to us as part of the application process. If all or part of the requested information is not provided, this may impact on your application for appointment to the vacancy.

Please answer the following questions by circling the reply that applies to your personal circumstances.

If you answer “yes” to any question, please provide details in an attachment to this form.

Please note that answering “yes” to any question does not necessarily preclude you from being considered for appointment. Your response will be treated as confidential and will only be used for purposes connected with this proposed appointment.

Glossary

“actual conflict of interest”	actual conflict of interest may arise when an employee or a person in public office is asked to make a decision as a public officer that directly affects or impacts their personal or private interests
“partnership”	This can include partnership as described under the Partnership Act or equivalent in the relevant jurisdiction.

“perceived conflict of interest”	perceived conflict of interest is concerned with an employee’s (or a person who holds a public office) decision could be questioned based on a personal or private interest that may not actually have impacted any decision.
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1	Do you have disclosable criminal convictions. i.e. convictions as an adult that form part of your criminal history other than those protected by the Spent Convictions Scheme (see Part VIIC of the <i>Crimes Act 1914</i>)?	Yes / No
2	Are you, or have you been, the respondent or defendant in any civil or criminal court action (including as a company director or other office holder)?	Yes / No
3 (a)	Have you ever been declared bankrupt, entered into a debt agreement under Part IX of the <i>Bankruptcy Act 1996</i> (the Bankruptcy Act) or entered into a personal insolvency agreement under Part X of the Bankruptcy Act?	Yes / No
3 (b)	If you are in a partnership, have any of your partners ever been declared bankrupt, entered into a debt agreement under Part IX of the Bankruptcy Act or entered into a personal insolvency agreement under Part X of the Bankruptcy Act?	Yes / No
4	Has any business or commercial enterprise for which you, or if applicable your partner(s), have had responsibility ever gone into receivership or a similar scheme or arrangement?	Yes / No
5	During the last 10 years have you, or if applicable your partner(s), been the subject of a court order in connection with monies owing to another party?	Yes / No
6	Have you ever been summonsed or charged concerning non-payment of tax or outstanding tax debts, investigated for tax evasion or defaults, or negotiated with the Australian Taxation Office over outstanding tax debts?	Yes / No
7	Have you ever been the subject of a complaint to a professional body which has been substantiated, or is currently under investigation?	Yes / No
8	Have you ever been dismissed from employment because of a discipline or misconduct issue?	Yes / No
9	Do you or your immediate family have any financial interest in any company, shares port folio or business, or are you or your immediate family employed or engaged by any company or business, which might have dealing with, or an actual or perceived interest in the decisions of, this office to which you may be appointed? <i>(If yes, include all relevant details and advice on how this conflict of interest would be managed, in a separate attachment)</i>	Yes / No
10	Are you a lobbyist registered on the Australian Government’s Lobbyists Register or any register of a state or territory of the same or similar nature? <i>(If yes, please provide details on a separate attachment)</i>	Yes / No
11	Do you have income from any sources other than your main source of employment income relating to: <ul style="list-style-type: none">• contracts• offices held in return for payment or other reward, or• a trade, vocation or profession engaged in by you? <i>(If yes, please provide details on a separate attachment)</i>	Yes / No

12	Do you participate or belong to Associations, hold memberships with groups of professionals that are sponsored by pharmaceutical companies.	Yes / No
13 (a)	In the past 12 months have you received any gifts or benefits from pharmaceutical companies?*	Yes / No
	<i>(If yes, please provide details on a separate attachment)</i>	
13 (b)	Did you declare the gifts or benefits?*	Yes / No
	<i>(If yes or no, please provide details on a separate attachment)</i>	
14	Is there any other information which could be relevant to your suitability for the proposed appointment?	Yes / No

* Please note that where there is an asterisk (*) your referee will be asked these questions.

Assurance

I advise that, to the best of my knowledge, my private, business and financial interests, including taxation affairs, would not conflict with my duties, should I be successful in my application or otherwise cause embarrassment to myself, the National Boards, AHPRA or State, Territory or Commonwealth Governments during my term of appointment.

I also undertake to advise AHPRA should a situation arise in the future which might cause a conflict of interest with my responsibilities under this appointment.

Signature:

Date:
