



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

NT - Private interest Declaration

November 2014

Confidential information

Name: _____

Board: _____

Applied for appointment as: Practitioner member Community member

Instructions

This form gathers information that is essential to your application for appointment to the vacancy on a state, territory or regional board. All appointments are made by the Minister of Health.

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

The personal information you provide is needed for to help assess your application for this vacancy. It may be shared with other persons or organisations, for example the Minister and their advisors, as the completion of this form is part of the selection and appointment process for the vacancy on a state, territory or regional board. Should you wish to gain access to your personal information held by AHPRA please contact our privacy officer by writing 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.

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 or business, or are you or your immediate family employed or engaged by any company or business, which might have dealing with, or an interest in the decisions of, the office to which you may be appointed? <i>(If yes, include advice in the attachment on how this conflict of interest would be managed)</i>	Yes / No
10	Are you a lobbyist registered on the Australian Government's Lobbyists Register or the register of a state or territory?	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? 	Yes / No
12	Is there any other information which could be relevant to your suitability for the proposed appointment?	Yes / No

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 as a state, territory or regional board member or otherwise cause embarrassment to myself or to AHPRA or state, territory or Commonwealth Governments during my term of appointment.

I also undertake to advise AHPRA or the relevant state, territory or regional board Chair should a situation arise in the future which might cause a conflict of interest with my responsibilities under this appointment.

Signature: _____

Date: _____ / _____ / 2015