

Aboriginal and Torres Strait Islander Health Practice Occupational Therapy Optometry Chinese Medicine Chiropractic Dental Medical Medical Radiation Practice

Nursing and Midwifery

Optometry Osteopathy Pharmacy Physiotherapy Podiatry Psychology

## Australian Health Practitioner Regulation Agency

## Private interests declaration

January 20	16			
Confide	ntial information			
Name:				
Vacancy:				
Applied fo	r appointment as:  Practitioner member Community member			
Instruction	ns			
	pathers information that is essential to your application for appointment. All appointmen e National Board.	nts are		
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 <i>Privacy Act</i> 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 and circumsta	swer the following questions by circling the reply that applies to your personal nces.			
If you ans	wer "yes" to any question, please provide details in an attachment to this form.			
considered	e that answering "yes" to any question does not necessarily preclude you from being for appointment. Your response will be treated as confidential and will only be used for onnected with this proposed appointment.	r		
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	Yes / No		

action (including as a company director or other office holder)?

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?	
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?	
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?	
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?	
7	Have you ever been the subject of a complaint to a professional body which has been substantiated, or is currently under investigation?	
8	Have you ever been dismissed from employment because of a discipline or misconduct issue?	
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?  (If yes, include advice in the attachment on how this conflict of interest would be managed)	
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:  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, 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 or the relevant National Board Chair should a situation arise in the future which might cause a conflict of interest with my responsibilities under this appointment.

Signature:	Date: