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| **Conflict of Interest and Confidentiality Agreement** | Tick |

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| **question** | **Who and when?**  Anyone involved in a procurement activity must complete this agreement before developing tender documents, joining an evaluation panel or making a decision including reviewing contract documents and awarding a contract. Before you complete this form, read the Quick-Guide: Conflicts of Interest. |

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| **Name of person making the declaration:** |  |
| **Position:** |  |
| **Campus/School/Service Centre/Executive:** |  |
| **Procurement (or Sourcing) Activity;** |  |
| **Role in the procurement (or Sourcing) activity:** |  |

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| **import-info** | ***“In a small country like ours, conflicts of interest in our working lives are natural and unavoidable. The existence of a conflict of interest does not necessarily mean that someone has done something wrong, and it need not cause problems. It just needs to be identified and managed carefully.”* Controller & Auditor-General** |

1. Do you have any actual, potential or perceived conflicts of interest?

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| Do you have any personal interest in the purchasing decision?  *(e.g. you own shares in a supplier or related company)* | **Yes**   **No**  **Potentially** (tick ‘potentially’ if others could perceive you have a conflict) |
| Are you a relative or close friend of someone with a personal interest in the goods or services being purchased or who could be personally affected by the purchasing decision?  (*e.g. a family member is an employee or shareholder of a supplier)* | **Yes**   **No**  **Potentially** (tick ‘potentially’ if others could perceive you have a conflict) |
| Do you have any personal obligations, loyalties or bias that could influence the way you evaluate offers and recommend purchases?  *(e.g. a close friendship with an employee of a supplier)* | **Yes**   **No**  **Potentially** (tick ‘potentially’ if others could perceive you have a conflict) |
| Have you recently been offered any special discounts, gifts, trips, hospitality, rewards or favours by suppliers of the goods or services being purchased?  *(e.g. free travel; free samples for your own use)* | **Yes**   **No**  **Potentially** (tick ‘potentially’ if others could perceive you have a conflict) |
| Are you aware of anything that could give the appearance that you might be biased towards or against a particular supplier?  *(e.g. you have expressed strong views about a supplier; you worked for a supplier; you use a supplier’s corporate box at a sports event)* | **Yes**   **No**  **Potentially** (tick ‘potentially’ if others could perceive you have a conflict) |

Confidentiality responsibilities

All of the procurement project’s discussions, meetings and material (written and electronic) are confidential and I agree to keep this information safe. I will not give this information to anyone outside the immediate team involved in this procurement exercise without prior approval from the Procurement Manager or the Legal & Contracts Manager.

Restrictions on contact with suppliers

I agree that my contact with potential suppliers is restricted during the period of the tender. I understand that until the successful supplier has been announced I will not:

* pass information or make comments to them about the tender
* receive any gift, gratuity, hospitality or any inducement from them
* meet them or have any discussion about the tender.
* I will pass any requests for information and meetings from potential suppliers to the Procurement Manager of the Legal & Contracts Manager.

Declaration of conflict of interest

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| **Actual** conflict of interest is where you already have a conflict.  **Potential** conflict of interest is where the conflict is about to happen or could happen.  **Perceived** conflict of interest is where other people might reasonably think you are not being objective. | If you have answered **‘Yes’** or **‘Potentially’** to any of the above questions, please provide details here. Otherwise sign the declaration below. |

Your declaration

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| **Declaration –** I confirm that the above details are correct to the best of my knowledge and I make this declaration in good faith. If circumstances change, I will immediate notify the Procurement Manager or the Legal & Contracts Manager as may be applicable. | | | |
| Signature: |  | | Date:Click or tap to enter a date. |
| **Review by Procurement Manager / Legal & Contracts Manager (Senior Legal Counsel) –** I confirm that I have received this declaration and noted the contents. Where a conflict of interest is declared, complete the next part of the form. | | | |
| Name: | |  | |
| Signature: | |  | Date:Click or tap to enter a date. |

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| **Conflict of Interest Management Plan** |

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| **question** | **Who and when?**  In consultation with the Procurement Manager or the Legal & Contracts Manager, complete this Plan when you declare a conflict of interest. Decide how to manage the conflict and give details below. |

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| **Procurement (or Sourcing) Activity:** |  |

1. How the conflict of interest will be managed

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| **There are five options for managing or resolving your conflict of interest:**  **Restrict** your involvement in the process and ongoing management of the contract  **Recruit** an independent third party to oversee part or all of the process and the ongoing management of the contract  **Remove** yourself from the process and the ongoing management of the contract  **Relinquish** your private interest that causes the conflict  **Resign** from the agency | The following plan has been agreed to manage your declared conflict of interest. This takes into account the conflict’s likely effect on your role and responsibilities in the procurement activity, as well as the risks to the process and the agency’s reputation. |
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| **Declaration** – I agree to the above Conflict of Interest Management Plan | | |
| Signature:  Person making the declaration |  | Date:Click or tap to enter a date. |
| **Approval** – I approve the above Conflict of Interest Management Plan | | |
| Name: | Project Manager  Procurement Manager/Senior Legal Counsel  DCE/CEO or Council Member | *Please use only one role* |
| Signature: | Date:Click or tap to enter a date. |
| **Resolved** – the conflict of interest has now been resolved and no further action is required | | |
| Signature:  Procurement Manager |  | Date:Click or tap to enter a date. |

(3) Ongoing conflict of interest

The following conflict of interest is disclosed.

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| **Nature of the conflict of interest** | **How the conflict of interest will be managed** |
| Indicate expected duration of the conflict. | Describe arrangements. |
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| **Declaration** – I agree to the above Conflict of Interest Management Plan | | |
| Signature:  Person making the declaration |  | Date:Click or tap to enter a date. |

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| **Approval** – I approve the above Conflict of Interest Management Plan | | |
| Name: | Project Manager  Procurement Manager/Senior Legal Counsel  EGM/CEO or Council Member | *Please use only one role* |
| Signature: | Date:Click or tap to enter a date. |

Email the completed Conflict of Interest and Confidentially Agreement to:

1. Procurement Manager
2. Manager Risk and Assurance
3. Senior Legal Counsel
4. Project Manager