

Annual Conflict of Interest Declaration Form

The **annual conflict of interest declaration form sample** helps organizations systematically identify and manage potential conflicts among employees. This form ensures transparency and compliance with ethical standards by documenting personal interests that may influence professional decisions. Utilizing a standardized sample simplifies the review process and promotes integrity within the workplace.

Employee Information

Full Name	
Job Title	
Department	
Date	

Declaration of Interests

Please answer the following questions. If you answer "Yes" to any, please provide details in the space provided.

Question	Yes / No	Details (if applicable)
Do you or any immediate family member hold a financial interest in any entity with which our organization conducts business?		
Are you engaged in consulting, advisory, or employment relationships with outside organizations that may conflict with your duties here?		
Have you received any gifts, payments, or services from individuals or companies that may influence your professional decisions?		
Do you have any other potential conflicts of interest not covered above?		

Employee Declaration

I declare that the information provided above is complete and accurate to the best of my knowledge. I agree to promptly report any future conflicts of interest that may arise during my employment.

Date:

Employee Signature

For Internal Use Only:
Reviewed by: Date:
Action Taken (if any):