

**FORM 3 – CONFLICT OF INTEREST DECLARATION**

I / We, \_\_\_\_\_(the approved provider), make the following declaration of any actual or perceived conflict of interest, including but not limited to any pecuniary or other interests in [insert school name] or any relationships our staff and office bearers have with [insert school name] management, staff and/or School Council members.

**Name (print)**

**Signed:**

**Date:**