**A close-up of a logo

AI-generated content may be incorrect.**

**IPM DECLARATION OF INTERESTS FORM**

|  |  |
| --- | --- |
| **Category** | **Please provide details of the interest and whether it applies to yourself or, where appropriate, a member of your immediate family, connected persons or some other close personal connection.** |
| Current employment and any previous employment with ongoing financial interest. |  |
| Appointments (voluntary or paid positions), e.g. Trusteeships, directorships, local authority membership, tribunals etc. |  |
| Membership of any professional body, special interest groups or mutual support organisations. |  |
| Investments in unlisted companies, partnerships and other forms of business, major shareholdings (e.g. more than 1% or 5% of issued capital) and beneficial interests. |  |
| Gifts or hospitality offered to you by external bodies and whether this was declined or accepted in the last twelve months. |  |
| Do you use, or care for a user of the organisation’s services? |  |
| Any contractual relationship with the charity or its subsidiary. |  |
| Any other conflicts that are not covered by the above. |  |

By signing below, I confirm that the above information is complete and accurate. I undertake to update as necessary the information provided, and to review the accuracy of the information on an annual basis. I consent to its use in accordance with the IPM conflicts of interest policy and for no other purpose.

Signed:

Position: Date: