SPREP CONFLICT OF INTEREST FORM

Organisation/Individual Name : _____

☐ I confirm that I, my family members, and the organisation or company that I am involved with are independent from SPREP. To the best of my knowledge, there are no facts or circumstances, past or present, or that could arise in the foreseeable future, which might call into question my independence.

If it becomes apparent during the procurement process that I may be perceived to have a conflict of interest, I will immediately declare that conflict and will cease to participate in the procurement process, unless or until it is determined that I may continue.

OR

☐ I declare that there is a potential conflict of interest in the submission of my proposal [please provide an explanation with your proposal]

_____ _____

Name, Signature Date

Title_____