**Declaration of Potential Conflict of Interest**

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| --- | --- |
| **Staff Member name** |  |
| **Role at ELATT** |  |
| **Course affected by the potential conflict of interest, including start and end date** |  |
| **Name of staff, volunteer, student or other involved in potential conflict of interest.** |  |
| **Nature of relationship and potential conflict of interest.** |  |
| **Please explain how this potential conflict of interest is being managed** | |
|  | |
| **Party 1: signed and dated** |  |
| **Party 2: signed and dated** |  |