



This declaration form supports the Heywood Rural Health's Gifts, benefits and hospitality policy. Employees must declare all non-token offers of gifts, benefits and hospitality (whether accepted or declined) on this form and seek written approval from the Chief executive Officer to accept any non-token offer.

Individual to complete	
1. Declaration date	
2. Name, position and unit/division	
<i>Details of the gift, benefit or hospitality</i>	
3. Date offered	
4. Describe the gift, benefit or hospitality offered	
5. Estimated or actual value	
6. Offered by (name of individual/organisation making the offer)	
7. Is the person or entity making the offer a business associate of the organisation (Y/N)? If yes, describe the relationship between them and the organisation. If no, describe the relationship between you and the person or organisation making the offer.	
8. Reason for making the offer	
9. Would accepting the offer: a) create an actual potential or perceived conflict of interest exist (Y/N); or b) bring you, the organisation or the public sector into disrepute (Y/N)? (If either is answered YES, then the offer must be declined in accordance with the minimum accountabilities)	<i>Detail of conflict of interest:</i>
10. Is there a legitimate business benefit to the organisation, public sector or State for accepting the offer, i.e. does it meet the following: a) it was offered during the course of the your official duties (Y/N); and b) it relates to your official responsibilities (Y/N); and c) it has a benefit to the organisation, public sector or State (Y/N). (If NO then offer must be declined, and if YES then the business benefit must be detailed, in accordance with the minimum accountabilities).	<i>Detail of business benefit:</i>
11. I accepted the offer YES / NO	<i>Signature</i>

	<i>Date</i>
Manager to complete	
1. Name, position and unit/division	
2. Relationship to employee	
<i>Complete if individual declined offer</i>	
3. I have reviewed this declaration form and submitted it for inclusion on the organisation's gifts, benefits and hospitality register.	Signature: Date:
<i>Complete if individual accepted offer</i>	
4. I have reviewed this declaration form and, confirm that, to my knowledge, accepting this offer: a) does not raise an actual, potential or perceived conflict of interest for the individual or myself; and b) will not bring the individual, myself, the organisation or the public sector into disrepute; and c) will provide a clear business benefit to the organisation, the public sector or the State.	Signature: Date:
5. Detail decision regarding ownership of tangible offers (e.g. specify whether employee retained gift; transferred to organisation's ownership; returned to offeror; donated to charity etc.)	
<i>Completed form to be submitted to the Chief Executive Officer for inclusion on the organisation's gifts, benefits and hospitality register.</i>	