

KIBABII UNIVERSITY

Declaration of Conflict of Interest Form

Declaration of Conflict of Interest Part A- Declaration (to be completed by staff member)	
To: (Approving Authority)	
I would like to report the following existing/ potential conflict of interest situation arising during the	
discharge of my official duties:	
1. Persons/companies/Institution/Agenda in Meetings with whom/ which I have official dealings and/	
or personal interest	
(a)	
(b)	
(c)	
(d)	
2. Brief description of my duties which involve the persons/companies/Institutions/Agenda	
mentioned above and these are the areas of real/possible conflict of interest.	
(a)	
(b)	
(c)	
(d)	



Part I	B- Acknowledgment (to be completed by Approving Authority)
To: (I	Declaring Member)
Your	declaration foris noted.
It has	s been decided that (Tick as appropriate):
i.	You should refrain from performing or getting involved in performing the work/participating
	in deliberations regarding as described in Part A, which may give rise to conflict of interest.
ii.	You should continue to handle the work/ participate in deliberations regarding as described in
	Part A, provided that there is no change in information declared above.
iii.	Other conditions (please specify)
	Date Name & Title of Approving Authority

Copy: Vice Chancellor

