Notification of other employment

(including volunteering) declaration

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| **Section A: Employee details** | | | | | | | | | |
| **Last name:** | | | **First name:** | | | | | | |
| **Employee number:** | | | **Position:** | | | | | | |
| **Division:** | | | **School/business unit:** | | | | | | |
| **Secondary B: Other employment (including volunteering) details** | | | | | | | | | |
| **Name of the organisation:** | | | | | | | | | |
| **Position held:** Position details: consultancy/employment type/self-employment/unpaid work/volunteering | | | | | | | | | |
| **Nature of work:** | | | | | | | | | |
| **Expected duration** | **Start date** \_\_\_/\_\_\_/\_\_\_ | | | | | **End date** \_\_\_/\_\_\_/\_\_\_ | | | |
| **Time to be committed per week** | **Sun** | **Mon** | | **Tue** | **Wed** | | **Thu** | **Fri** | **Sat** |
|  |  | |  |  | |  |  |  |
| **Additional information:** | | | | | | | | | |
| **Section C: Employee declaration** | | | | | | | | | |
| *I hereby confirm that:*  I have read and understood the Department of Education’s *Notification of other employment* procedure  my responses in the Conflict of interest (COI) checklist: other employment (including volunteering) are correct to the best of my knowledge  I understand that I have an ethical obligation to ensure my ability to fulfil my departmental duties is not adversely affected by my other employment; and that my other employment does not compromise the department’s integrity  I make this declaration of any actual, potential or perceived COI in relation to my other employment in good faith  I will update this form by completing the *Monitor and Review* section below, and submit the updated form to my manager within one (1) month of my becoming aware of any change to actual, potential or perceived COI associated with my other employment. | | | | | | | | | |



**Employee signature:**

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| **Section D: Manager details** | | |
| **Last name:** | **First name:** | |
| **Employee number:** | **Position:** | |
| **Division:** | **School/business unit:** | |
| **Section D: Manager declaration** | | |
| *I hereby declare that I have received and considered this notification of other employment declaration and determine that:* | | |
| There is **no** actual, potential or perceived COI in relation to this notification of other employment declaration; **or** | | Choose an item. |
| There is an actual, potential or perceived COI in relation to this Notification of other employment declaration (complete **Section D (1)**) and   * I confirm the actual, potential or perceived COI is **remote** and requires no further action other than to be recorded (complete **Section D (1)**) **or** * I confirm the actual, potential or perceived COI has been discussed with the employee and the strategies listed below will be put in place to manage the conflict in a manner consistent with the procedures provided in the COI Policy and Procedure and NOE Procedure (complete **Section D (2)**) **or** * I confirm the actual, potential or perceived COI is **not able to be resolved or managed in the public interest and accordingly I am unable to approve this application.** I have discussed this with the employee and their immediate supervisor (complete **Section D (3)**). | | Choose an item. |
| **Section D (1):** Nature of the actual, potential or perceived COI: | | |
| **Section D (2):** Strategies to manage the actual, potential or perceived COI: | | |
| **Section D (3):** Reasons this notification of other employment is **not approved:** | | |



**Manager signature:**

**\_\_\_\_/\_\_\_\_/\_\_\_\_**

## Monitor and Review

The following adjustment to action taken to resolve and/or manage the COI associated with my other employment has occurred:

*I agree the above adjustment has been decided upon to resolve and/or manage the COI.*



**Employee signature:**\_\_\_/\_\_\_/\_\_\_



**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Manager signature:** \_\_\_/\_\_\_/\_\_\_

Privacy Notice

The Department of Education is collecting, using and storing your personal information in accordance with the *Information Privacy Act 2009* and the *Public Service Act 2008* for the purposes of assessing your conflict disclosure and whether you, as an employee of the department, have an interest that conflicts or may conflict with the discharge of your duties as a public service employee. The information will only be accessed by authorised employees within the department. Your information will be securely filed and accessed by authorised employees only. No personal information will be provided to any external parties, unless it is authorised or required by law. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact your manager in the first instance. This form needs to be revised on an annual basis.

**COI checklist: *other employment (including volunteering)***

In assessing whether other employment may lead to a COI, it may be useful to ask yourself these questions. The consideration objective in assessing these situations is “*Could this conflict with my public duty to serve the public interest*?”.

**NOTE:** This checklist is not designed to be a definitive tool in determining what is or is not a relevant interest and/or COI. The intent of this checklist is to act as a guide only.

***Quick tip:*** It is possible to answer “no” to all of the questions in the checklist and still have a conflict of interest. Open discussion, declaration and transparency will assist all employees avoid having their integrity questioned through their engagement in other employment.

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| **PART A – RELEVANT INTEREST** | |
| Is it likely the organisation, group or individual with whom you have an interest, may have dealings with you or the department in a professional capacity? | Choose an item. |
| Is the interest held with a client or supplier to the department? | Choose an item. |
| Is the interest with an organisation, group or individual, one in which you, or your workgroup, may investigate or provide advice to in a professional capacity? | Choose an item. |
| Does your private interest interfere with your capacity to fulfil your professional duties? (Example: do they require your attendance in work hours, or are excessive hours required that impact on your health and well-being or ability to undertake your departmental work effectively?). | Choose an item. |
| Is it reasonably possible that you will, directly or indirectly, gain a financial or other benefit from a decision or advice you or your workgroup may be involved in? | Choose an item. |
| Do your immediate family, close friends or professional contacts have any interests that might be affected by decisions and/or advice that you or your workgroup are involved in? | Choose an item. |
| **PART B – CONFLICTS OF INTEREST** | |
| Have you accepted hospitality, entertainment or other benefits from a person or organisation with whom you or your workgroup are dealing with in your professional capacity? | Choose an item. |
| Is there an expectation that you will, directly or indirectly, gain a benefit or loss from the outcome of a decision or advice you or the department is/may be involved in? | Choose an item. |
| Do you have a current or previous personal, professional or financial relationship with any interested parties to a decision or advice you or the department are/were involved in? | Choose an item. |
| Does your reputation, or that of a friend or associate, stand to be enhanced or damaged due to a proposed decision or action you or the department will be  involved in? | Choose an item. |
| Do you hold any personal views or biases that may lead others to reasonably conclude that you are not an appropriate person to deal with, or be involved in, a decision, action or management of a matter? | Choose an item. |
| Have you or others in your team, made prior commitments or promises to interested parties involved in the matter? | Choose an item. |
| Could this situation have influence on any future employment opportunities for you or a colleague? | Choose an item. |
| **PART C – PERCEPTIONS** | |
| Would a reasonable person make a negative assessment of the circumstances without necessarily knowing all of the facts? | Choose an item. |
| Could your involvement cast doubt on your integrity or the integrity of the department? | Choose an item. |
| If you saw someone else doing this, not knowing all of the facts would you suspect they were acting dishonestly, corruptly or fraudulently? | Choose an item. |
| Would you be happy for your colleagues and/or the public to be aware of your involvement, association or connection with the other entity/activity? | Choose an item. |
| Could the media reasonably portray your involvement, association or connection negatively? | Choose an item. |
| Is the matter of particular public interest, high-risk, high-stakes or controversial? | Choose an item. |
| **PART D – FINANCIAL INTEREST** | |
| Is your interest pecuniary (an actual or potential financial gain or loss)?  Note: It is important to identify if an interest is pecuniary because there can be legal consequences should a conflict of interest of this nature exist. | Choose an item. |
| Is the secondary employment with a client of or supplier to the department? | Choose an item. |
| Is the secondary employment with an organisation, group or individual that the department may provide a service or advice to? | Choose an item. |
| Is it possible that through your secondary employment that you could, directly or indirectly, gain a financial (or other benefit) from decisions or advice provided by the department? | Choose an item. |
| Is it reasonably possible that through your secondary employment that you could directly or indirectly, be adversely affected by decisions or advice provided by the department? | Choose an item. |
| Could the secondary employment have the potential to affect your health, well-being or ability to safely and effectively carry out your official duties? | Choose an item. |
| Could the secondary employment have the potential to affect your availability to carry out your official duties (for example, by requiring your attendance during normal work hours, or limiting your ability to travel for work)? | Choose an item. |
| Might a reasonable person doubt your integrity, or the integrity of the department, because of your secondary employment? | Choose an item. |
| If you saw someone else doing this, not knowing all of the facts would you be suspicious about the arrangement? | Choose an item. |
| Would you be happy for your colleagues and/or the public to be aware of your involvement, association or connection? | Choose an item. |
| Could the media reasonably portray your secondary employment negatively? | Choose an item. |
| Is the secondary employment in relation to a matter of particular public interest or controversial? | Choose an item. |

### Quick tips – mitigating action

You should list the strategies put in place to resolve or manage conflict of interest in relation to your other employment on your Notification of other employment (including volunteering) declaration, for example, if your other employment services school children, you may take steps to ensure that it does not service children of schools in which you currently work or are likely to work. Consider whether any undertakings you make should be communicated to stakeholders, and whether steps you propose can be measured to determine their effectiveness.