**Form (F): Conflict of Interest**

### Suppliers, Service Providers and Consultants Disclosure Form

**Section 1: Suppliers, service providers and consultant disclosure**

I/we am/are disclosing the following circumstances that may constitute a conflict of interest with NRC, as described in NRC’s Conflict of Interest Policy:

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1. If another conflict of interest arises during my/our relationship with NRC, I/we will disclose it immediately to the person leading the process.
2. I/we will disclose any potential situation where the nature of my/our association with a relevant third party could create the appearance of a conflict of interest with NRC, or which could induce me/us, or could reasonably be perceived as inducing me/us, to make a decision that is not in the best interests of NRC.
3. I/we have accurately completed this disclosure form to the best of my/our knowledge.

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| Signed: |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name: |
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| Name of Supplier/Service Provider /Consultant: |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Position: |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date and place: |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Section 2: Review and Endorsement by Logistics and HR Manager**

To be completed by both the HR and Logistics managers and signed off by the Country or Regional Director:

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| Logistics Manager feedback | HR Manager feedback | Any resolution method/proposed action |
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□ We believe that a plan to manage the conflict of interest is not required and that no further action is necessary in relation to this matter; or

* We believe that the plan outlined in the disclosure will mitigate or remove the conflict of interest but will continue to monitor the situation; or
* We cannot adequately resolve the conflict of interest with the supplier/consultant and shall not proceed with the contract.

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| Country Director Name: |
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| Country Director Signature: |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date and Place: |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Optional: To be included if NRC Office decides to use it if advice is needed**

## Section 3: Review by Regional Director or Designee

I have reviewed the conflict of interest disclosure and;

* I support the endorsed management plan; or
* I propose the following action is taken in relation to this matter: (Give details below)

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

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| Signature |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Position: |
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