



**RCPE Event:**

**Event Date:**

**Name of speaker:**

**Presentation title:**

**Please fill in this form and return it to the Education Coordinator. Please note that the form can be filled in electronically, you do not require an electronic signature, typing your name into the corresponding signature box is equivalent. Please remember to save the form before returning it to the Education Coordinator.**

### RCPE Declaration of Interest for speakers

Please declare all benefits accruing to you, as a result of a financial or other relationship with a commercial entity or other organisation, which could be perceived by “a fair minded and informed observer” as influencing your contribution to the event, and which you consider should be declared to the audience. The aim of College policy on declarations of interest is not to limit the involvement of participants with a significant financial or other relationship; rather it is to provide the attendees with information that they can use to assess the significance of any potential conflicts of interest. Please note that interests can be personal or non-personal, specific or non-specific, and current or lapsed as follows:

|                     |  |
|---------------------|--|
| <b>Personal</b>     | Direct personal benefit to the individual, e.g. consultancy, share holdings or individual research funding |
| <b>Non personal</b> | Indirect benefit - e.g. grants or fellowships within a department  |
| <b>Specific</b>     | Directly relevant to the event e.g. funding from the manufacturer of a directly relevant drug or equipment |
| <b>Non specific</b> | Indirectly relevant to the event e.g. funding from a company that manufactures other drugs or equipment    |
| <b>Current</b>      | Within 12 months of the event  |
| <b>Lapsed</b>       | Benefit dates from longer than 12 months before the event  |

**Please note that all specific interests should be disclosed to the audience during the course of your presentation**

**Please check one of the following boxes:**

I have no conflict of interest or other relationship with a commercial entity or other organisation in relation to my contribution to the event

I have an involvement with one or more organisations that could be perceived as a conflict of interest in the context of my contribution, as follows:

Please enter the name of the organisation, then check the appropriate boxes in the grid below. Please complete a separate grid for each organisation in which you have an interest. *Further grids are to be found on Page 2.*

| Name of company/ organisation: |                       |        |                           |        |                           |        |                               |        |  |
|--------------------------------|-----------------------|--------|---------------------------|--------|---------------------------|--------|-------------------------------|--------|--|
|                                | Personal/<br>Specific |        | Non personal/<br>Specific |        | Personal/<br>Non-specific |        | Non-personal/<br>Non-specific |        |  |
|                                | Current               | Lapsed | Current                   | Lapsed | Current                   | Lapsed | Current                       | Lapsed |  |
| Research                       |                       |        |                           |        |                           |        |                               |        |  |
| Shares                         |                       |        |                           |        |                           |        |                               |        |  |
| Consultancy                    |                       |        |                           |        |                           |        |                               |        |  |
| Other                          |                       |        |                           |        |                           |        |                               |        |  |



Please enter the name of the organisation, then check the appropriate boxes in the grid below. Please complete a separate grid for each organisation in which you have an interest. *Please contact the Education Coordinator if further grids are required.*

| Name of company/ organisation: |                       |        |                           |        |                           |        |                               |        |
|--------------------------------|-----------------------|--------|---------------------------|--------|---------------------------|--------|-------------------------------|--------|
|                                | Personal/<br>Specific |        | Non personal/<br>Specific |        | Personal/<br>Non-specific |        | Non-personal/<br>Non-specific |        |
|                                | Current               | Lapsed | Current                   | Lapsed | Current                   | Lapsed | Current                       | Lapsed |
| Research                       |                       |        |                           |        |                           |        |                               |        |
| Shares                         |                       |        |                           |        |                           |        |                               |        |
| Consultancy                    |                       |        |                           |        |                           |        |                               |        |
| Other                          |                       |        |                           |        |                           |        |                               |        |

| Name of company/ organisation: |                       |        |                           |        |                           |        |                               |        |
|--------------------------------|-----------------------|--------|---------------------------|--------|---------------------------|--------|-------------------------------|--------|
|                                | Personal/<br>Specific |        | Non personal/<br>Specific |        | Personal/<br>Non-specific |        | Non-personal/<br>Non-specific |        |
|                                | Current               | Lapsed | Current                   | Lapsed | Current                   | Lapsed | Current                       | Lapsed |
| Research                       |                       |        |                           |        |                           |        |                               |        |
| Shares                         |                       |        |                           |        |                           |        |                               |        |
| Consultancy                    |                       |        |                           |        |                           |        |                               |        |
| Other                          |                       |        |                           |        |                           |        |                               |        |

| Name of company/ organisation: |                       |        |                           |        |                           |        |                               |        |
|--------------------------------|-----------------------|--------|---------------------------|--------|---------------------------|--------|-------------------------------|--------|
|                                | Personal/<br>Specific |        | Non personal/<br>Specific |        | Personal/<br>Non-specific |        | Non-personal/<br>Non-specific |        |
|                                | Current               | Lapsed | Current                   | Lapsed | Current                   | Lapsed | Current                       | Lapsed |
| Research                       |                       |        |                           |        |                           |        |                               |        |
| Shares                         |                       |        |                           |        |                           |        |                               |        |
| Consultancy                    |                       |        |                           |        |                           |        |                               |        |
| Other                          |                       |        |                           |        |                           |        |                               |        |

Signature

[Redacted Signature]

Date:

The College receives this declaration in good faith. Written declarations are made available to delegates and are published alongside relevant material.

**Please be aware that if you fail to complete and sign this form, the Chair will make this fact known to the audience before the start of your presentation.**

Thank you for your co-operation.  
Education, Training and Assessment Department, RCPE