



# THE PROMISE FOUNDATION

*For mental health, education and potential realisation*

## DECLARATION OF INTERESTS FORM

**This declaration is to be completed annually by the Director, Board of Trustees and Senior Advisors.**

**NAME:**

**POSITION:**

**DATE OF DECLARATION:**

1. Do you hold a financial interest by way of being a donor to The Promise Foundation

Yes

Do you have any decision making control over how your donations are being used in achieving the objectives of The Promise Foundation

Yes [Member of Ethics Committee approval and comment]

No [Proceed to Q 2]

No [Proceed to Q2]

2. Do you provide services in your professional capacity for projects and programs managed by the Promise Foundation?

Yes

Do you have a formal contract governing your remuneration and deliverables?

Yes [Line Manager confirmation that remuneration is based on current market scales for similar services]

No [Member of the Ethics Committee approval and comment]

No [Proceed to Q3]

3. Are you or an organization in which you have an interest providing services to the Foundation? For example, printing supplies, food supplies, transport, other services?

Yes

Do you have a formal contract governing the terms of contract?

Yes [Director to confirm a transparent tender process undertaken]

No [Member of the Ethics Committee approval and comment]

No [Proceed to Declaration]

**Declaration:**

I declare that I have answered the above truthfully and to the best of my knowledge.

Signature: .....