

### Disclosure of Interest – FORM 5 Interest Review Form

Note: Additional space may be required to provide comprehensive information relating to your interest review – wherever this extra information being provided is necessary, please use a *Form 6 – Additional Information Form*.

Please provide Central Interest Register Identification Number (CIRID) that relates to the interest being reviewed:

Where any fillable fields are irrelevant or not applicable, please mark them with 'N/A'

#### **Personal Information**

Name of University Representative:

College:

Department/Centre:

Location:

Phone Number and/or Extension:

Email Address:

List all positions you currently hold at the ANU:

External Entity name (if applicable)

Date of This Review:

Review Frequency:

Twice Yearly

Quarterly

Annual

Other:

1. Does this review relate to an Interest or a Conflict of Interest (COI)

Interest

Conflict of Interest

2. If the Interest created/creates any form of conflict, has a *Form 4 - Conflict Permission Request* been completed?

Yes No Not Applicable

If Yes, please attach the completed *Form 4* when submitting.

#### 3. Do you continue to maintain this Interest?

Yes No

If No, please explain:

### 4. What positions relating to this interest do you currently hold that have not been previously disclosed?

#### Not applicable

If applicable, please provide the title of any position(s), any additional management responsibilities associated with previously disclosed position(s), the entity/entities to which the position(s) relate and specify whether the originated in a jurisdiction external to Australia (i.e. is a foreign entity).

### 5. Have you been assigned any new management responsibilities with the ANU since you last updated this interest?

Yes No Not applicable

If Yes, please explain:

### 6. Do you have any new consulting agreements or any other contractual agreements with any external entities?

Yes No Not applicable

If Yes, please explain:

7. Have there been any changes in the relationship between entities you hold an interest/position in and the ANU since you last reviewed your interest?

Yes No Not applicable

If Yes, please explain:

8. Are you aware of any changes to any agreements between entities you hold an interest/position in and the ANU since you last reviewed your interest?

Yes No Not applicable

If Yes, please explain:

9. If applicable, please list all ANU Intellectual Property that has been disclosed to external entities *and/or* any patents that have been lodged since you last reviewed this interest.

Please include the title, date and co-inventors/authors of the disclosure, patent or copyright.

None Not Applicable Described below

#### 10. Do you have an entitlement to receive a distribution under the ANU Intellectual Property Policy as a result of monies received by the ANU from an external entity/entities or related sources (e.g. sale of shares)?

Yes No Not Applicable

If Yes, please specify the entity/entities the distributions are expected to be received from:

# 11. Has any information included in your approved *Form 4 - Conflict Permission Request* changed?

Yes No Not applicable

If Yes, please explain:

# 12. Are you involved in any pre-clinical or clinical trials associated with any ANU Intellectual Property that is relevant to the interest being reviewed?

Please attach a copy of your approved informed consent (as applicable).

Yes No Not applicable

If Yes, please identify sponsor, protocol title, Chief Investigator / co-CI(s), location of trial and list HREC approval:

13. Please provide an updated list of any students, post-doctorates and other trainees that are under your direct or indirect supervision.

□ None □ Described below

# 14. Please list all ANU employees under your supervision or for whom you have some responsibility.

□ None □ Described bel
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#### 15. Does your current Interest Management Plan need an update?

Yes No Not Applicable

If Yes, attach an Updated Interest Management Plan with this submission.

Further Comments:

### 16. Please list or describe any other pertinent information in accordance with the full disclosure requirements of the ANU DOI Framework. Note any new attachments.

□ None □ Described below:

Describe:

#### **University Representative Declaration**

I have provided the information listed above to ensure compliance with the full disclosure requirements of the ANU DOI Framework. All information is true and correct to the best of my knowledge at the time of the review discussion held with my Supervisor.

University Representative Signature:

Print Name:

Review Date:

### **Supervisor Section**

### The Supervisor has established the following: *(mark only items that apply)*

#### Form 1 – Interest Disclosure Form

An undisclosed interest has been identified and a Form 1 will be completed.

Not Applicable

#### Comments (if applicable):

#### Form 2 – Interest Risk Assessment (Mandatory)

A new Interest Risk Assessment has been completed relating to this interest.

#### Comments (if applicable):

#### Form 3 - Interest Management Plan

No Interest Management Plan was in place (not required)

An Interest Management Plan should be developed

Specific section(s) of the Interest Management Plan should be updated

Specify which section(s):

Entire Interest Management Plan should be updated

An Interest Management Plan is no longer required

The Interest Management Plan is still required, but no updates are needed.

#### **Comments (if applicable):**

#### Form 4 - Conflict Permission

Continues in its current form

Should be amended

Further Comments:

Is no longer required

Comments (if applicable):

Certification by the Supervisor performing this review:

**Supervisor Declaration** 

This review and discussion with the University Representative was conducted in accordance with the ANU Disclosure of Interest Framework and all other applicable University policies.

Supervisor Signature:

Supervisor Print Name:

Title:

College/Area:

Review Date:

#### Copy to:

Corporate Governance and Risk Office (<u>disclosure@anu.edu.au</u>) (Mandatory)

Department Head or Director

College Representative

Chief People Officer (For High Risk items only)

Director, CGRO (For High Risk items only)