# **Conflict Of Interest Declaration Form**

## **Employee Details**

Employee Name	Employee ID	Designation	Department	Manager	HR		
vinitha	565654655	php	Information	dept	hr		
mali		developer	Technology	user(sd3@consultlane.com)	user(sd5@consultlane.com)		

#### **Confirmation**

Do you have an	y actual / p	otential	conflict o	of interest	situations	you are	e facing	as per	'Conflict o	Эf
Interest' Policy.	Click Here	to downl	oad polic	cy.						

Yes

 $\bigcirc$  No

#### **Information**

Please describe below the actual or potential conflict of interest.

Do you have any actual / potential conflict of interest situations you are facing as per 'Conflict of Interest' Policy. Click Here to download policy.

Please select the category Personal Workplace Relationships 

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### **Declaration**

I hereby declare that the information provided above is true and complete to best of my knowledge and belief. In addition, I affirm that i will make further disclosures as may be required in future in the event of any change of circustances. I have read and understood the Conflict of Interest policy and agree to abide with the same.

Date: 31-Mar-2021