

Foreign Interference Declaration Form

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This form serves as a guide for the type of information required to declare a potential Foreign Interference matter. Declarations are made using an on-line form in Service Central. For more information, please read the ACU Declaration of Interest Policy.

SECTION 1: PERSONAL DETAILS

NAME: [Click here to enter text.](#)

POSITION / BUSINESS AREA / FACULTY: [Click here to enter text.](#)

PHONE: [Click here to enter text.](#) EMAIL: [Click here to enter text.](#)

SECTION 2A: DISCLOSURE DETAILS – FUNDING

Are you receiving any financial support (cash or in-kind) for education or research related activities from a country other than Australia? Yes / No

If yes:

— From which country? _____

— What is the name of the organisation? _____

— Please provide a summary of the type of financial support (e.g. name of funding program, period of the funding, type of support received):

[Click here to enter text.](#)

SECTION 2B: DISCLOSURE DETAILS – FOREIGN POSITION

Do you hold a position (paid or unpaid) or honorific titles in any foreign university, academic organisation or company, or are you under any other obligations to a foreign university, academic organisation or company (e.g. membership of a talent recruitment program)? Yes / No

If yes:

— In which country? _____

— What is the name the organisation providing the position or title? _____

— Please provide a summary of the position, including any obligations associated with the title.

[Click here to enter text.](#)

SECTION 2C: DISCLOSURE DETAILS – ASSOCIATIONS/AFFILIATIONS

Are you associated or affiliated with a foreign government or foreign military, policing or intelligence organisation? Yes / No

If yes:

— In which country do you have the association of affiliation? _____

— What is the name the organisation? _____

— Provide details of each association/affiliation (e.g. dates and nature of the affiliation)

[Click here to enter text.](#)

SECTION 3: TO BE COMPLETED BY MANAGER / SUPERVISOR OR RELEVANT ACU REPRESENTATIVE

The details provided by the staff member or affiliate: *(tick appropriate box)*

- do not constitute a foreign interference concern, and the staff member or affiliate is authorised to continue the activity (go to Section 4).
- constitute a potential foreign interference situation (see detailed action plan below).

The above considerations have been discussed with the staff member or affiliate. The staff member or affiliate has agreed to take the following action to eliminate/manage the disclosure:

Click here to enter text.

This action plan is to be reviewed:

- | | | |
|---|--|--|
| <input type="checkbox"/> Within 1 month | <input type="checkbox"/> Within 3 months | <input type="checkbox"/> Within 6 months |
| <input type="checkbox"/> Within 12 months | <input type="checkbox"/> Other – specify | <input type="checkbox"/> N/A: the concern is one-off or short duration |

SECTION 4: DECLARATION – STAFF MEMBER OR AFFILIATE

I consent to my personal information being collected for the purpose of assessing the information I have provided regarding foreign funding I am receiving, a foreign position I hold, or any foreign associations/affiliations, in accordance with the Declaration of Interest Policy – Staff and Affiliates. I understand that the *Privacy Act 1988 (Cth)* authorises the collection, and parties to whom my personal information may be disclosed in relation to this matter.

To the best of my knowledge and belief all details relating to any foreign funding, foreign position, or foreign associations/affiliations have been fully disclosed in this form in accordance with the requirements of the ACU's Declaration of Interest Policy – Staff and Affiliates.

I acknowledge, and agree to comply with, any instructions given to me regarding this disclosure, and to notify my supervisor or relevant ACU Representative of any changes.

SIGNATURE:

DATE:

SECTION 5: MANAGER / SUPERVISOR / RELEVANT ACU REPRESENTATIVE

The actions described in the approach outlined in Section 3 have been put in place to effectively manage any actual, potential or perceived conflict of interest disclosed in Section 2. The approach outlined in Section 3 ensures that the ACU's public interests and reputation is adequately protected and does not breach any laws.

NAME: [Click here to enter text.](#)

SIGNATURE:

DATE:

SECTION 6: DELEGATE (Executive/Senior Executive/COO/VC/Chancellor)

- Approved Not Approved
 Approved with the following conditions:

NAME: [Click here to enter text.](#)

POSITION:

SIGNATURE:

DATE: