



HUMAN RESOURCES UNIT

DECLARATION OF INTERESTS FOR INDIVIDUAL EXTERNAL EXPERTS

To ensure the highest integrity and public confidence in its regulatory activities, MCAZ requires that its appointed Individual External experts, disclose any circumstances that could give rise to a potential conflict of interest related to the subject of the activity in which they will be involved. This refers to any interest that may affect, or may reasonably be perceived to affect, the individual's objectivity and independence.

The disclosure shall be made on this Declaration of Interest (DOI) form on the financial, professional, or any other interest relevant to the subject of the assignment or meeting in which the undersigned have been asked to participate in or contribute towards and any interest that could be affected by the outcome of the assignment or meeting. The relevant interests of the undersigned immediate family members and other parties with whom the undersigned have substantial common interests, and which may be perceived as unduly influencing the undersigned judgement must also be declared, whenever the undersigned are aware of it.

All potentially significant interests will be disclosed to other participants at the start of the activity, and you one shall be asked if there have been changes. A summary of all declarations and actions taken to manage any declared interests will be made available to relevant parties.

I, ..., being an Individual External Expert declare that I understand the provisions of section 12A of the Medicines and Allied Substances Control Act [Chapter 15:03] (hereinafter referred to as the "Act") relating to disclosure of interest.

I therefore hereby affirm and solemnly declare that: -

1. I shall disclose any direct or indirect pecuniary interest that I or my immediate family members have or likely to have which may conflict with my duties as an Individual External of the Authority.
2. I shall not take any part in the consideration or discussion of, or vote on, any questions before the Authority or Committee which relate to any matter in which I or my immediate family members have, or are likely to have, a direct or indirect interest.

Signed at this day of

Signature: Date: