

Appendix B

Reporting Form New or Changed Outside Interest

1. Employee details	
Employee name	
Employee number	
Job title	
Department	
Location – branch	
Date of submission	[dd-mm-yyyy]

2. Details of outside interest	
Are you reporting your own outside interest?	<input type="checkbox"/> Yes; please fill out entire form (Section 4 excluded) <input type="checkbox"/> No I want to report a possible conflict of interest relating to activities of an Immediate Family Member ¹ ; please fill out the entire form (Section 4 excluded) and provide more information on the relationship below. <p>Family Member name is not required to be disclosed unless a conflict is determined at which point the name will be requested by Compliance</p> <p>Relationship to family member:</p> <input type="checkbox"/> No I don't have an outside interest nor do I want to report a possible conflict of interest relating to activities of an Immediate Family Member; please fill out Section 3 – Compliance Statement
Name of organisation/entity	
Registered address	
Nature of organisation	<input type="checkbox"/> Financial Services <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Charity <input type="checkbox"/> Political Party or affiliation <input type="checkbox"/> Food and Agri business <input type="checkbox"/> Other [please substantiate]:
Position to be carried out in organisation/ entity	
Start date	[dd-mm-yyyy]

¹ Immediate Family Members are defined as any spouse, partner, children, parents or siblings of an Employee, OR any other relative who depends on the Employee for financial support.

Details of involvement	Please select (multiple selections possible) <input type="checkbox"/> Volunteer <input type="checkbox"/> Office Bearer <input type="checkbox"/> Employee <input type="checkbox"/> Advisor <input type="checkbox"/> Ownership (self) (disclose percentage) <input type="checkbox"/> Ownership (spouse/near family) (disclose percentage) <input type="checkbox"/> Other (please substantiate):		
Weekly commitment involved	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Office hours <input type="checkbox"/> None <input type="checkbox"/> 0-3 hours <input type="checkbox"/> 4-6 hours <input type="checkbox"/> 7-9 hours <input type="checkbox"/> > 9 hours </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Outside office hours <input type="checkbox"/> None <input type="checkbox"/> 0-3 hours <input type="checkbox"/> 4-6 hours <input type="checkbox"/> 7-9 hours <input type="checkbox"/> > 9 hours </td> </tr> </table>	<input type="checkbox"/> Office hours <input type="checkbox"/> None <input type="checkbox"/> 0-3 hours <input type="checkbox"/> 4-6 hours <input type="checkbox"/> 7-9 hours <input type="checkbox"/> > 9 hours	<input type="checkbox"/> Outside office hours <input type="checkbox"/> None <input type="checkbox"/> 0-3 hours <input type="checkbox"/> 4-6 hours <input type="checkbox"/> 7-9 hours <input type="checkbox"/> > 9 hours
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Description of activity (key role requirements and/or objectives from outside interest)	[Please substantiate]		
Financial or non financial benefits received?	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please substantiate]		
Potential for conflicts with your current activities within Rabobank to your knowledge?	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please substantiate]		
Does the organisation (for which you fulfil your outside interest) have or has it had a connection with a Rabobank entity?	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please substantiate]		
Does the proposed role have any connection or similarity to your role within Rabobank?	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please substantiate]		
In the course of your proposed role, could you be asked or required to undertake an activity which will impact on a Rabobank entity either directly (e.g. an activity which affects your ability to carry out your day to day work within Rabobank) or indirectly (e.g. through an association with a party which could potentially adversely affect a Rabobank interest)?	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please substantiate]		

3. Compliance Statement (mandatory)	
<input type="checkbox"/> I have read and understood Rabobank's policies related to outside interests, conflicts of interest and relevant Codes of Conduct.	
<input type="checkbox"/> The information provided above is complete and correct and I have not withheld any relevant information that would be required for Rabobank to assess whether or not to consent to the outside Interest referred to.	
<input type="checkbox"/> I accept it is my responsibility to comply with Rabobanks' policies at all times. Furthermore, I am aware that with respect to possible conflicts of activities relating to Immediate Family Member on which no information has been provided, I am fully responsible for any potential conflicts of interests which might influence my activities within Rabobank.	
<input type="checkbox"/> If Rabobank consents to the outside interest, I will promptly notify Rabobank of any change in circumstances relating to the outside Interest which may affect or cause any conflict of interest.	
Signature employee	

4. Approval (not to be filled out by the employee)	
Date	[dd-mm-yyyy]
Name approver	
Function title	
Location	
Decision	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Conditional approved [Please substantiate]
Date of decision	[dd-mm-yyyy]
Signature Approver	

For new staff (who received this form in the on boarding package) please return the form to HR (together with the other completed forms).

For existing staff – please send this form to your Designated Approver and Compliance