

CODE OF CONDUCT – DECLARATION OF INTERESTS

Name:

Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership	
Remunerated employment or offices	ROLANDS PHARMACY UNIVERSITY OF SHEFFIELD
Remunerated Consultancy(s)	
Remunerated work performed under contract	
Names of companies or other bodies in which I have an interest, either on my own account, my spouse or infant children, for a beneficial interest in share holdings greater than the 10% of the share capital	
Remunerated contributions to professional and scientific publications	
Membership of other pharmaceutical bodies	RPS PDA

I agree to update this document at any time there is a change in my interest

Signed:

Date:



26/1/26