



Royal Pharmaceutical Society of Great Britain

Helping pharmacists achieve excellence

Register of Interests

1. **EMPLOYMENT:** Please list full and part time employment, giving details of employer and nature of duties, including
Paid directorships of companies (public or private)
Full time paid employment, including self-employment
Part time paid employment, including self-employment
 2. **OFFICES HELD FOR WHICH YOU ARE PAID:** Please list offices held for which you are paid. . Where this includes membership of organisations associated with health or healthcare, science or pharmaceutical education, or other public service offices please indicate the nature of such membership and any office held.
 3. **OTHER PAID ACTIVITY:** Please include consultancies, self employed work (contract work), and contributions to professional and scientific publications for which you are paid.
 4. **SPONSORSHIP:** Please include any awards, sponsorship, bursaries, grants for research, etc.
 5. **UNPAID OFFICES HELD:** Please list offices held. Where this includes membership of organisations associated with health or healthcare, science or pharmaceutical education, or other public service offices, please indicate the nature of such membership and any office held.
 6. **UNPAID MEMBERSHIPS:** Please include membership of organisations, committees etc not listed above, including branches/regions of the Society.
 7. **FAMILY INTERESTS:** Please list any financial interests of yourself or close family members that might be considered relevant to your position as a member of Council.
 8. **BENEFICIAL INTERESTS IN SHAREHOLDINGS:** Please list the names of companies or other bodies in which you have, either on your own behalf or on behalf of a spouse or infant children, a beneficial interest in shareholding of a nominal value greater than one-hundredth of the issued share capital
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