

**Employee Code of Conduct**  
**Declaration of Conflict of Interest or Potential/Perceived Conflict of Interest**

This form shall be completed in any situation where your personal interest conflicts, appears to conflict, or could potentially conflict, in any way with the interests of PowerON. In addition, PowerON's prior approval is required if an employee chooses to work part-time for another organization and the work conflicts, appears to conflict, or could conflict with their duties as an PowerON employee.

**Instructions:**

**Employee:** Discuss the situation with your manager first, then complete Part A, attaching additional pages if more space is required.

**Manager:** Review and determine the appropriate action, consult with your Manager and Human Resources. Complete Part B of the form and discuss the disposition with the employee. Attach additional pages if more space is required.

Please send completed form by email to Human Resources [hr@poweronenergy.ca](mailto:hr@poweronenergy.ca).

**This form is to be completed to declare a Conflict of Interest or Potential/Perceived Conflict of Interest.**

Part A	
Employee Name (please print):	Employee Number:
Employee Title:	Phone Number:
Manager Name and Title (please print):	Manager Phone Number:
EMPLOYEE: (details regarding the potential/perceived/actual Conflict of Interest):	
Employee Signature:	Date:
Part B	
Manager Comments and Disposition:	
Manager Signature:	<u>This disposition has been discussed with employee:</u>
Date:	Employee Signature:
	Date:

Personal information contained on this form is collected and shall only be used pursuant to the *PowerON Supplier Code of Conduct* to identify and resolve actual or potential conflicts of interest or the appearance of conflicts of interest.