



DECLARATION FORM FOR THE RECEIVING OF HONORARIUM/SPEAKER FEE DECLARATION

This declaration form supports Duopharma Biotech's Declaration of Interest Policy and the Guidelines for the Receipt of Honorarium/Speaker Fees. Officers and/or Employees must declare all the honorarium received (**including those exceeding the predetermined rates**) as outlined in the Guidelines and seek written approval from their Head of Department. The completed form is to be submitted to the Group Risk Management & Integrity.

PART A : DETAILS OF THE RECIPIENT

Name		Department	
Staff No		Job Grade	
Highest Qualification	SPM	Diploma	Degree
		Master	PhD

PART B : EVENT / PAYMENT DETAILS

Date of Engagement	
Inviting Organisation	
Purpose of the Invitation	
Duration (Total Number of Hours)	(hours)
Total Amount Received (RM)	

PART C : ENDORSEMENT

Recipient:

I hereby declare that I have followed the Honorarium guideline. I am fully responsible if the information given is false / incorrect.

Name:

Date:

Remark (if any):

Group Risk Management & Integrity:

☐

Complete

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Incomplete. Remark :-

Name & Stamp: _____

Date: _____

Head of Department:

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Approved

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Not Approved. Reason :-

Name & Stamp: _____

Date: _____