

Folia Internal COI Declaration Form

1. Purpose

This Conflict of Interest (COI) Declaration Form is designed for all Folia staff, board members, and contractors to:

1. Certify that they do not have a conflict of interest in relation to operators, certification bodies, or other parties involved in Folia's certification scheme.
2. Disclose any potential or existing conflicts of interest at the occurrence of any trigger event set out in Folia's Conflict of Interest Policy, Section 5, including in response to a proactive notification from the Head of Compliance upon onboarding of a new operator.
3. Enable the Head of Compliance to assess and escalate any conflicts in accordance with Folia's Conflict of Interest Policy.

This form must be completed and signed upon occurrence of any trigger event as defined in Section 5 of the COI Policy. If in doubt as to whether a situation requires disclosure, contact the Head of Compliance before taking any action.

2. Instructions

1. Complete all sections of this form for the specific project.
2. If you identify any potential conflicts, provide a detailed explanation in Section 4.
3. Submit the completed form to the Head of Compliance for assessment before participating in any related activities. Where the disclosure concerns the CEO, submit directly to the Chairman of the Board of Directors.
4. Forms must be resubmitted upon occurrence of any new trigger event as defined in Section 5 of the COI Policy.

3. Personal Information

Name:	
Position/Role at Folia:	
Department:	
Trigger Event	<i>Appointment / Operator onboarding / Annual review / Change in personal circumstances / New audit</i>
Project Name:	<i>Leave blank if Trigger event is not project-specific</i>

Project ID:	
Date of Declaration:	

4. Conflict of Interest Certification

4.1 Certification

Please review the following statements and select **Yes** or **No** for each. If you select **Yes**, provide additional details in the designated comment column below each question:

Certification Statement	Yes/No	Comments
1. I have a direct or indirect financial, professional, or personal interest in the project identified above.		
2. I have relationships with certification bodies, operators, or other stakeholders involved in the project that could compromise my impartiality.		
3. I have familial relationships with individuals or entities directly involved in this project.		
4. I am a shareholder, beneficiary, or owner of any organization involved in the project's development, verification, or validation.		

5. I have previously provided consulting or other professional services to the operator or stakeholders that could impact my objectivity.		
6. I am receiving or expecting to receive gifts, financial incentives, or benefits from entities associated with this project.		
7. I have non-financial interests (e.g., reputational, professional affiliations) that could affect my ability to perform my duties impartially.		

5. Acknowledgment and Signature

I, the undersigned, confirm that the information provided in this declaration is true and complete to the best of my knowledge. I acknowledge my responsibility to promptly update this form should a new conflict of interest arise during the course of the project.

Signature:	
Date:	

6. Head of Compliance Assessment

(To be completed by the Head of Compliance)

Reviewed by	
Date of Review:	
Resolution/Mitigation Plan:	

7. Submission and Record Keeping

1. Submit the completed form to the Head of Compliance (or, where the disclosure concerns the CEO, to the Chairman of the Board of Directors).
2. All forms will be maintained in Folia's COI Registry and associated with the specific project.
3. Forms will be maintained in the COI Registry and reviewed by the Head of Compliance upon occurrence of each trigger event and at least annually as part of the scheme's internal monitoring process.