

Notification of the Acceptance of Gifts, Benefits and Hospitality

1. This form is to be completed for all gifts, benefits and hospitality judged to exceed \$200 in value in order to comply with the [Acceptance of Gifts, Benefits and Hospitality Policy](#).
2. This form must be completed and faxed to Executive Services on 9905-5342 within 14 days of receiving the gift, benefit or hospitality.

SECTION 1 – Details of staff member who received the gift, benefit or hospitality			
Organisational Unit		Campus	Staff Number
Title	Family Name	Given Name(s)	

SECTION 2 – Details of the gift, benefit or hospitality received	
Date received	
Description of gift, benefit or hospitality	
Estimated market value	
Donor name and details	
Brief outline of the circumstances in which the gift, benefit or hospitality was provided	
If a gift, the permanent location of the gift (Note: all gifts made to the University remain the property of the University)	

SECTION 3 – DECLARATION BY STAFF MEMBER

I confirm that the details entered on this form are true and correct and believe that the acceptance of this gift, benefit or hospitality has not placed the University or myself under an obligation to the donor.

Signature Date Contact Ext. No. ____

EXECUTIVE SERVICES USE ONLY			
Processed by	Date / /	Checked by	Date / /

For assistance in completing the form contact the Executive Services on Ext.52007