

Volt-Age Conflict of Interest Declaration Form

Please complete and return th	ie signed form by email	to: volt-age@concordia.ca
Surname: Brown		
First name(s): Shelley		
Institution: Dalhousie Uni	versity	
City: Halifax	Province: NS	
I hereby declare the following	:	
■ No Conflict of Interest		
Potential Conflict of Inter	rest (please specify belo	ow)
Area of Work	Nature of Interest/C	onflict
Note: If you have more Conflicto your form listing out the ad		space above allows, please attach a separate page
disclosed all interests that I cu	rrently perceive as app	rest Policy and agree to abide by this policy. I have licable in relation to my engagement with Volt-Age. s well as when new issues arise.
Date: March 21, 2025	Signature	Shelley Brown