**Independence Resolution Memorandum** *- to be completed whenever a ‘YES’ answer is recorded on the* ***Professional Independence Checklist for Employees****.*

Independence question relates to:

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| **Date of Inquiry:** |  |
| **Client:** |  |
| **Employee/Principal:** |  |

1. Please describe the issue/problem/query:

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1. Sources/persons consulted (**Note**: attach a copy of any applicable material):

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1. What are the findings/results?

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1. What is the decision/outcome?

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| **Resolved by:** | **Date resolved:** |
| **Resolution acknowledged by employee:** | **Date:** |