



**DECLARATION OF PERSONAL INTERESTS - FORM**

**NAME:** Per Söderberg

**POSITION WITHIN ICNIRP:** Chair, SCIV

**ACTIVITIES AND ASSETS**

Always mention the title of the activity, function, asset listed, and the name of company, organization, or institution involved.

**Period 2010-2011**

Please, also report any application or negotiation for future work

**EMPLOYMENT** (main employer, function, title)

Uppsala university, teaching, research and clinical ophthalmology, Professor of Ophthalmology

**CONSULTANCY, ADVISORY POSITIONS AND SERVICES**

Paid or unpaid consultancy including service as a scientific or other advisor. Paid or unpaid advisory office or services for a commercial entity or any organizations and/or as part of a regulatory legislative or judicial process with an interest in NIR (i.e. membership in scientific councils, associations, etc.)

When relevant, please give the percentage of your income derived from this source.

Occasionally consultant for the Swedish police on laser accidents, 2 %

Occasionally guest editor and referee for scientific journals, no payment.

Member of the Radiation protection committee, Swedish Academy of Science, no payment

Board member Svedbergs lab, Uppsala university, no payment



**RESEARCH SUPPORT RECEIVED FROM COMMERCIAL ENTITIES**

Grants, collaborations, sponsorships, other funding and non-monetary support valued at more than EUR 1000 overall (include equipment, facilities, research assistants, paid travel to meetings, etc.)

Non

**INVESTMENTS AND COMMERCIAL INTERESTS**

Investments (valued at more than EUR 10 000) in a commercial entity, in a trust or holding company with an interest related to NIR

Such as commercial business interests (e.g., proprietorships, partnerships, joint ventures) and stocks, bonds, stock options, other securities (e.g., short sales) - excluding broadly diversified mutual funds, pension funds or similar investments.

Non

**INTELLECTUAL PROPERTY**

Such as patents, trademarks, or copyrights (also include pending applications) and proprietary know-how in a substance, technology or process.

Non



**ADDITIONAL INFORMATION**

When relevant, please provide details about the subject, the parties involved, the time-frame and any other relevant details.

To your knowledge, would the outcome of your activities within ICNIRP benefit or adversely affect interests of others with whom you have substantial common personal, financial or professional interests (such as your spouse or partner, adult children or siblings)?

No

Is there any other aspect of your background or present circumstances not addressed above that might be perceived as affecting your objectivity or independence?

No

I hereby declare that the disclosed information is true and complete to the best of my knowledge. Should there be any change to the above information, I will promptly notify the ICNIRP Secretariat and complete a new declaration of interests which takes the changes into account.

Date: 11-10-13

Signature:

A handwritten signature in black ink, appearing to be 'P. Salmeron'.