

SAMRC BOARD MEMBER ANNUAL DECLARATION OF INTERESTS

Title (Mr/Ms/Professor/Doctor)	Professor
Name & Surname	Tyrone Pretorius
Name of Primary Employer or Self-Employed	University of the Western Cape
Position Held	Professor

I hereby certify that the following information is complete and correct to the best of my knowledge and I hereby declare to have the following interests:

Please provide details of any potential conflicts of interests arising out of the following:

(1) Board Directorships <i>(Please provide the full name of the organisation/institution/entity)</i> NONE	
1.	
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10.	
(2) Research Funding <i>(funding you/ your Institution/Organisation is receiving from the SAMRC)</i>	
NONE personally. Other researchers at UWC may be receiving funding from SAMRC	
(3) Shareholding/Financial Interests Only declare interests in companies that provide goods or services to the SAMRC	
NONE	

(4) Major academic collaborators <i>[national and international]</i> Please declare all significant collaborations outside your primary institution or organisation
Wellcome funded project MySleep involves: UWC, Monash University Australia, University of Oxford UK, Harvard Medical School USA, University of Oregon,
(5) Interests of Close Family Members: Please provide the full name and relationship (spouse/partner/son/daughter etc.) of immediate family members associated with or employed by an institution/organisation/company that receives funding from the SAMRC or provides goods and services to the SAMRC.
I have family members employed by UWC. None of them are currently receiving SAMRC funding.
(6) Sponsorships, Gifts and Hospitality from a source other than a family member Please include name of entity, description of gift/sponsorship and value
NONE
(7) Any other interests you wish to declare:
NONE

Signature:



Date: 6 November 2025