

## **DECLARATION OF INDEPENDENCE AND CONFIDENTIALITY**

TO BE SUBMITTED PRIOR TO THE ASSESSMENT OF THE PROGRAMME

THE UNDERSIGNED

NAME:

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HOME ADDRESS:

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HAS BEEN ASKED TO ASSESS THE FOLLOWING PROGRAMME AS AN EXPERT / SECRETARY:

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APPLICATION SUBMITTED BY THE FOLLOWING INSTITUTION:

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HEREBY CERTIFIES TO NOT MAINTAINING ANY (FAMILY) CONNECTIONS OR TIES OF A PERSONAL NATURE OR AS A RESEARCHER / TEACHER, PROFESSIONAL OR CONSULTANT WITH THE ABOVE INSTITUTION, WHICH COULD AFFECT A FULLY INDEPENDENT JUDGEMENT REGARDING THE QUALITY OF THE PROGRAMME IN EITHER A POSITIVE OR A NEGATIVE SENSE;

HEREBY CERTIFIES TO NOT HAVING MAINTAINED SUCH CONNECTIONS OR TIES WITH THE INSTITUTION DURING THE PAST FIVE YEARS;

CERTIFIES TO OBSERVING STRICT CONFIDENTIALITY WITH REGARD TO ALL THAT HAS COME AND WILL COME TO HIS/HER NOTICE IN CONNECTION WITH THE ASSESSMENT, INsofar AS SUCH CONFIDENTIALITY CAN REASONABLY BE CLAIMED BY THE PROGRAMME, THE INSTITUTION OR NVAO;

HEREBY CERTIFIES TO BEING ACQUAINTED WITH THE NVAO CODE OF CONDUCT.

PLACE:

DATE:

SIGNATURE: