



AMERICAN ACADEMY OF FORENSIC SCIENCES
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FEPAC Form 5.7
(Commissioner Ethics & Professionalism)

Forensic Science Education Programs Accreditation Commission (FEPAC)

Commissioner Ethics and Professionalism Form

(This form is to be submitted to FEPAC annually by each Commissioner.)

AFFIRMATION OF ETHICS AND PROFESSIONALISM:

I have read and fully understand FEPAC's Conflict-of-Interest policy, as stated in Section 4.4 of the FEPAC Policies & Procedures Manual.

I agree to participate in all accreditation decisions of the Commission in a fair, open, and unbiased manner, free of any external influences.

I agree to evaluate programs for compliance with FEPAC's accreditation standards, not their compliance with any other set of standards or documents that may pertain to forensic science education.

I agree to maintain the confidentiality of FEPAC's accreditation system and will not discuss any program's self-study, the contents of its self-study, the on-site evaluation, the team report, or anything else related to the program's application for accreditation with anyone except FEPAC representatives.

I acknowledge that it is unethical for me to use any information I receive as a result of a program's application for FEPAC accreditation for my own personal or financial gain.

I agree that I will not discuss my personal opinions regarding the quality of any program that seeks FEPAC accreditation or the likelihood of its receiving accreditation with anyone associated with the institution/program.

Except as noted in the next paragraph, I know of no real or potential conflict of interest that would prevent me from participating in making any accreditation decision, and I believe that my participation in the decision-making process does not create any conflict of interest or the appearance of a conflict for me.

To the best of my knowledge, the institutions listed on the next page constitute the only situations and circumstances that may be considered conflicts of interest or potential conflicts of interest for me, or may create the appearance of a conflict for me, and I agree

to the best of my knowledge, the institutions listed below constitute the only situations and circumstances that may be considered conflicts of interest or potential conflicts of interest for me, or may create the appearance of a conflict for me, and I agree to recuse myself from the Commission's discussion of the forensic science programs offered by these institutions:

Institution: _____

Institution: _____

Institution: _____

Institution: _____

Institution: _____

I agree to voluntarily disclose to FEPAC any additional situations or circumstances which, in my judgment, may be considered a conflict or potential conflict of interest, or may create the appearance of a conflict, as they arise.

Signature of Commissioner

Date

Please use the space below to list any more institutions that present a conflict of interest for you.