**Professional Conduct Disclosure Form**

AAPS has a responsibility to protect the scientific and professional credibility of the organization. As a potential representative of AAPS, you are required to declare any issues that could affect your professional reputation and thus the credibility of AAPS.

Candidates and nominees for AAPS Awards, AAPS Fellow, AAPS Board of Directors, Editor-in-Chief of an AAPS journal, Chair of the Scientific Advisory Committee, and Chair of the AAPS PharmSci 360 or National Biotechnology Conference Scientific Programming Committees are required to answer the following questions by marking the appropriate response for each annually.

**Candidates and nominees must disclose matters that are resolved as well as matters that are still pending.**

Self-disclosure does not mean automatic disqualification of the candidate or nominee. However, each disclosure will receive a confidential review and follow-up discussion if there are areas of concern.

Please complete this Professional Conduct Disclosure Form no later than the specified request date. If you have questions, you may contact the appropriate staff liaison or Executive Director Tina Morris, Ph.D., at morrist@aaps.org.

1. Have you been the subject of a filed complaint regarding your professional conduct or scientific integrity?

□ No □ Yes. [If yes, you will be contacted for a discussion of the details of the complaint.]

1. Have you been the subject of, a defendant in, or respondent to any investigation, civil litigation, arbitration, mediation, or other action or proceeding in which your professional conduct or scientific integrity was at issue?

□ No □ Yes. [If yes, you will be contacted for a discussion in which you will be asked for a description of the investigation, civil litigation, arbitration, mediation, or other action or proceeding and any relevant background materials.]

1. Have you been convicted of or plead guilty to any crime in any court of law in which your professional conduct or scientific integrity was at issue?

□ No □ Yes. [If yes, you will be contacted and asked to provide a brief description of the crime and related court documents.]

**Certification**

The undersigned hereby affirms that they have read, understand, and agreed to comply with the [**AAPS Code of Ethics**](https://www.aaps.org/about-aaps/policies#ethics) **(PDF), the** [**AAPS Conflict of Interest Policy**](https://www.aaps.org/about-aaps/policies#conflict) **(PDF), the** [**AAPS Event Attendee Code of Conduct**](https://higherlogicdownload.s3.amazonaws.com/AAPS/bfc3a388-f31c-452f-88fd-941c2a445a10/UploadedImages/policies_/AAPS_PharmSci_360_and_Event_Attendee_Code_of_Conduct.pdf) **(PDF), and other policies and procedures as established and amended from time to time.**

By signing this document, I certify that, to the best of my knowledge, the above responses and all information provided by me on this Professional Conduct Disclosure Form are truthful, accurate, and complete. Additionally, I agree to notify AAPS staff and/or the AAPS Executive Director promptly of any material changes required in my responses to the above questions.

I acknowledge that failure to comply with AAPS policies and proceduresmay result in my ineligibility to receive, or revocation of, any award, honor, role, or other type of recognition, or governance position, and is grounds for potential sanctions against me, up to and including my expulsion from the organization.

Signed:

Print Name:

Date:

Email address:

Phone: