

	Confidentiality and Conflict of Interest / Conflict Declaration			Document No: 015
Document Code UDEPAK-GÇÇB	Release Date 25.10.2021	Revision Date 01.01.2019	Revision No Revision 0	Page No 1 / 2

**Association for Accreditation of
Dentistry Education Programs**

Website: <http://www.depad.org>

**CONFIDENTIALITY /
CONFLICT OF INTEREST/CONFLICT
DECLARATION FORM**

Version 1.1 / 2019

As a person working in the Association for Accreditation of Dentistry Education Programs, I, declare that,

1. I have read and understood the AADEP code of ethics, and I will be in ethical and professional behavior at the highest level;
2. I am aware of my responsibility to carry out my work according to AADEP criteria and in line with the safety, health and interest of the public, and to promptly disclose the factors that directly or indirectly conflict with these duties;
3. I will act as a reliable person, avoid all conflicts of interest and inform AADEP when a conflict of interest arises;
4. I will ensure the confidentiality of all documents and information I have accessed due to my duty;
5. The explanations I will make during the accreditation process will be impartial and accurate;
6. I will treat everyone equally, regardless of their race, language, religion, gender, age, marital status, and political opinion.
7. I will assist my colleagues and support them in complying with ethical rules;
8. I accept my dismissal by AADEP in case of non-compliance with these ethical rules.

Date: / /

Name - Surname