

**AVIXA Certification Committee Volunteer
Code of Conduct, Non-Disclosure and
Conflict of Interest Agreement**

I, _____, acknowledge that, in the course of service to and involvement with the AVIXA certification program, I am required to understand the expectations regarding Code of Conduct, Non-Disclosure and Conflict of Interest. I also understand that in order to meet the AVIXA certification program accreditation requirements each volunteer person who works with the certification program is required to review and sign this agreement form annually.

General Volunteer Code of Conduct

The purpose of the volunteer Code of Conduct is to provide a benchmark for those volunteers working with or supporting the AVIXA Certification program. The code is an agreement from the stated individual as relates to the mission of the Certification Committee which states: “The mission of the AVIXA Independent Certification Committee “Certification Committee” is to provide oversight to the development and administration of credible Certified Technology Specialist certifications (CTS®, CTS-D, CTS-I), and to assure the credentials meet high standards of ethical and professional practice for the audiovisual industry that assures the proficiency and competency of AV professionals.”

Accordingly, volunteers shall:

- Understand and accept their fiduciary responsibility to the whole industry and to the public and shall perform all of their duties in a manner reflective of good stewardship.
- Act fairly and be impartial and unbiased in their service to the AVIXA certification program and to the population of certificate holders.
- Conduct themselves in a professional manner during the conduct of certification business and shall treat all stakeholders with courtesy and respect.
- Not speak or act on behalf of the certification program or the Certification Committee without proper authorization.
- Support the decisions of the Certification Committee.
- Participate in the activities required of them to fulfill their charges and serve the mission of the certification program.
- Be an advocate for the certification program and support its mission.

Conflict of Interest

- Volunteers shall avoid personal and professional conflicts of interest in all matters pertaining to the certification program.
- Conflicting interests may include but are not limited to such areas as financial, personal relationships, and/or professional relationships.
- If a situation arises where it is unclear to me as to whether I have a conflict of interest, I shall discuss the issue with the AVIXA Director of Certification.

Volunteer Non-Disclosure Agreement

I understand that in working with the AVIXA certification program that I may have access to materials of a confidential and/or proprietary nature, in particular those related to the development and administration of the certification programs. "Confidential" and "proprietary" materials include, but are not limited to:

- Information regarding applicants', candidates', and certificants' certification status, personal and financial data;
- Information submitted in the investigation of complaints or involving ethics cases;

Item content, characteristics, development or other aspects of the examinations and their development, maintenance and administration;

- Exam-related technologies and components;
- Information regarding the administration of all components of the certification programs;

AVIXA corporate documents and financial data;

Therefore, I agree to the following conditions of service:

I understand and agree that the unauthorized disclosure of confidential or proprietary material could cause harm and irreparable injury to AVIXA and its certification programs which may be difficult to ascertain. Accordingly, I agree that AVIXA shall have the right to seek and obtain immediate injunctive relief resulting from material breaches of this Agreement, in addition to any other remedies at law available therefore without bond.

I understand that my service may be terminated immediately upon any material breach of the terms and conditions contained herein. The obligations under this agreement shall continue perpetually and survive the termination or expiration of my service.

I agree that this agreement shall be construed and controlled by the laws of the State of Virginia, and further consent to jurisdiction by the state and federal courts sitting in the State of Virginia.

Print Name _____ Date _____

Signature _____