

AABInternational

VISITING TEAM MEMBER APPLICATION FORM 205

Name _____ Position /Title _____

Institution or Organization _____

College or School _____ Department _____

Telephone (office) _____ Fax _____ Email _____

Telephone (home) _____ Cell _____

Address (home) _____

City _____ State _____ Country _____ Zip _____

COLLEGE DEGREES RECEIVED AND MAJOR:

| Earned Degree | Major | Institution |
|---------------|-------|-------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Specialized aviation credentials (list certificates and ratings): *

Academic Subject Areas of Specialization: *

Experience in academic standards/accreditation: *

Civil/Military Aviation Experience:

Languages spoken/written fluently and international experience (academic, work-related, time spent abroad, etc.):

Please mark (X) one or more of the following nine AABI options in terms of preference for service on visiting teams based on your experience and expertise:

Aviation Management

Aviation Maintenance

Aviation Electronics

Aviation Studies

Flight Education

Aviation Safety Science

Air Traffic Control

Unmanned Aircraft Systems

Graduate Studies

All of the Above

Please list all institutions with which you have conflicts of interest (including alma maters, associations with industry advisory boards, etc.):

Are you an AABI member? ____ Yes ____ No Is your Institution/Organization an AABI member? ____ Yes ____ No

Is your service to AABI as a visiting team member supported by your organization? ____ Yes ____ No

I have read the Conflict of Interest statement attached and declare that I will inform, in writing, any potential conflict of interest with respect to any AABI Educator member prior to accepting a team assignment. Signing this application will bind me to the confidentiality provisions of the AABI Policies & Procedures Manual (Form 225), attached.

Signature _____

Date _____

*** Attach Vita**

RETURN TO:

Aviation Accreditation Board International
115 S. 8th Street, Suite 102
Opelika, Alabama 36801
Phone: (334) 748-YFLY (9359)
FAX: (334) 748-9360

EXCERPTS FROM THE POLICIES AND PROCEDURES MANUAL

Form 225

3.5. Confidentiality of Information. Information supplied by the institution is for the confidential use of AABI and its agents, and will not be disclosed without the specific written authorization of the institution concerned.

3.5.1. The contents of all materials furnished for review purposes and discussion are considered privileged information. This includes all materials used by the visiting team, including the Self-Study. All deliberations by the Accreditation Committee and the AABI Board of Trustees regarding accreditation decisions are privileged and confidential.

3.5.2. The contents of all related documents, including business files, and the accreditation actions taken by the Board of Trustees may not be disclosed except under circumstances specifically approved by the AABI executive director or the Board of Trustees.

3.6. Conflict of Interest. The Board shall, from time to time, adopt rules and regulations governing the conduct of officers, trustees, members or employees, with respect to matters in which they have an interest in conflict with the interests of the AABI. Such rules and regulations shall forbid officers, trustees, members or employees from personally participating in AABI action with respect to any contract, transaction, accreditation or other matter in which any such officer, trustee, member or employee, has any interest, financial or otherwise, unless said officer, trustee, member or employee makes full disclosure of the circumstances to the AABI Board and said Board determines that (a) the interest is not so substantial as to affect the integrity of AABI and the services being rendered by said officer, trustee, member or employee; or (b) on the basis of Criteria to be established in such rules and regulations, the interest of said officer, trustee, member or employee is too remote or too inconsequential to affect the integrity of AABI and the services being rendered. This proscription against personal participation, set forth immediately above, shall be deemed to require any such affected officer, trustee, member or employee to recuse himself or herself (leave the room) during deliberations by the Board or any Committee of the Board concerning any such contract, transaction, accreditation or other matter giving rise to the appearance of a conflict of interest. The removal of any such person for such reason shall not defeat an otherwise valid quorum.

3.6.1 If service as an AABI Board member or alternate, as a committee chair, member or observer, leads to conflicts of interest, or questions regarding the objectivity and credibility of the accreditation process, then such a member should recuse himself or herself from the process. The AABI Board of Trustees expects members to disclose real or perceived conflicts of interest, and to recuse themselves from discussion or decisions so related. The intent of this policy is:

- a. To maintain credibility in the accreditation process and confidence in the work and recommendations of the visiting team as well as in the deliberation and recommendations of the Accreditation Committee, and in the deliberation and ruling of the Board of Trustees;
- b. To assure fairness and impartiality in the decision-making process; and
- c. To act impartially and avoid the appearance of impropriety.

3.6.2. Individuals representing AABI must not participate on a team visit or in any decision-making capacity if they have or have had a close, active association with a program or institution that is being considered for accreditation by AABI. Close association includes, but is not limited to:

- a. Current or past employment as faculty, staff or consultant at the institution or program;
- b. Current or past discussion or negotiation of employment with the institution or program;
- c. Attendance as student at the institution;
- d. Receipt of an honorary degree from the institution;
- e. An institution or program where a close, family relative is a student or employee;

- f. An unpaid official relationship with an institution, e.g., membership on the institution's board of trustees or industry advisory board; or
- g. A current or pending business relationship with the institution.

3.6.3. Records of Perceived Conflicts of Interest:

- 3.6.3.1. Individuals will provide the central office a copy of this record annually for the purpose of reporting any real or perceived conflicts of interest. Copies of these records will be provided to the individuals responsible for selection of team chairs and members.
- 3.6.3.2. All individuals representing AABI must sign a conflict of interest and confidentiality statement indicating that they have read and understand these policies.
- 3.6.3.3. Individuals must absent themselves from any portion of a AABI meeting in which discussions or decisions occur for which they have a real or perceived conflict of interest. Real or perceived conflicts may occur if there is:
 - a. A close, active association with a program or institution;
 - b. A financial, business or personal interest; or
 - c. Any reason that the individual cannot render an unbiased decision.
- 3.6.3.4. The names of individuals who have recused themselves during a meeting for conflicts of interest will be recorded.



CONFIDENTIALITY & CONFLICT OF INTEREST AGREEMENT

For the purpose of preventing the unauthorized disclosure of Confidential Information as defined in the Aviation Accreditation Board International (AABI) Policies & Procedures Manual, Sections 3.5 to 3.5.2 (attached), the parties agree to enter into a confidential relationship with respect to the disclosure of certain proprietary and confidential information. This agreement governs the conduct of AABI officers, trustees, visiting team members and employees.

Further, as stated in the AABI Policies & Procedures Manual, Sections 3.6 to 3.6.3.4 (attached), the undersigned agrees to notify AABI of any real or perceived conflicts of interest, and to recuse himself or herself in service as an AABI Board member, committee member or chair, visiting team member or chair, from discussions or decisions so related.

I hereby acknowledge receipt of, have read and understand these policies.

(Signature)

(Typed or printed name)

Date

Ms. Cecilia Shirley
AABI Vice President of Operations

Date