
Form #E-10

Board or State Association

Address

City

State

Zip

Certificate of Qualification and Affirmation of Confidentiality

This case is confidential.

I, the undersigned, member of a Hearing Panel of the Professional Standards Committee (or Board of Directors or tribunal thereof) of the

Board or State Association

do hereby acknowledge that any unauthorized disclosure or dissemination of the allegations, findings, or decision developed in connection with this case may violate Article 14 of the Code of Ethics and/or result in my removal from the Professional Standards Committee or Board of Directors, whichever is applicable.

Additionally, I hereby certify that I am not disqualified by any reason stated herein from hearing the case:

_____ vs. _____.

Cited case is a hearing addressing an alleged violation of the Code of Ethics or other membership duty as set forth in the bylaws of the Board.

Reasons for disqualification: Any member of the Hearing Panel (or Board of Directors or tribunal thereof) shall be disqualified from hearing any case if the member:

- (a) is related by blood or marriage to the complainant, respondent, or a ~~Bar~~ acting as counsel for either the complainant or respondent
- (b) is an employer, partner, employee, or in any way is associated in business with the complainant, respondent, or a ~~Bar~~ acting as counsel for either the complainant or respondent
- (c) is a party to the hearing, or a party or witness in any pending case involving any party to this hearing
- (d) knows of any reason acceptable to the Hearing Panel (or Board of Directors or tribunal thereof) that may prevent the member from rendering an impartial judgment

Type/Print Name

Signature

Dated: _____, 20____

NOTE: No more than one person licensed with any firm, partnership, or corporation may serve on the same tribunal. This limitation does not preclude two or more individuals from the same franchise from serving if the franchises are independently owned and operated.

(Revised 11/15)