

PROFESSIONAL CONDUCT DISCLOSURE FORM

As a candidate for an AGU award, honor, or governance position, please complete this on-line Professional Conduct Disclosure Form no later than the specified request date. If you have questions, you may contact the Ethics Office at ethics@agu.org.

Have you been subject of a filed allegation, complaint, investigation, sanction or other legal, civil or institutional proceeding, where there was a finding of misconduct; or, are you currently the subject of such an allegation, complaint, or investigation in which your professional conduct is at issue?

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

CERTIFICATION

The undersigned hereby affirms that he/she has read, understands, and agrees to comply with [the AGU Scientific Integrity and Professional Ethics Policy](#), including its Code of Conduct, and other policies and procedures established by AGU, as amended from time to time. By signing this document, I certify that, to the best of my knowledge, the above response and all information provided by me related to this Professional Conduct Disclosure Form are truthful, accurate, and complete, and I agree to notify AGU promptly of any material changes required in my responses to the above question. I acknowledge that failure to comply with AGU's Scientific Integrity and Professional Ethics Policy, including its Code of Conduct, may result in my ineligibility to receive, or revocation of, any AGU award, honor, other type of AGU recognition, or governance position, and is grounds for potential sanctions against me.

Name:

Email address:

Phone: