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RESEARCH DECLARATION FORM

This form is to be completed by anyone proposing to conduct research within CISV. Please send the completed and signed form to the International Office at the above address, for the attention of the Evaluation and Research Committee (EVR). Faxes or scanned documents sent by e-mail are acceptable.

Name and Contact Details of the Proposed Researcher

Given Name			
Surname			
Number & Street			
Town / City			
Area / State / Province			
Country		Postcode / Zip code	
Country Code		Area Code	Local Number
Home Tel			
Mobile Number			
Office Tel			
E mail			

Date of submission of proposal	
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By undertaking research in CISV you will be in a position of trust in an organization working with children around the world. In order to safeguard the youth in our care and to protect CISV the following questions must be answered.	Indicate Yes or No
In your research, do you agree to act consistently with CISV's philosophy/code of behaviour and rules?	
Do you authorize CISV to conduct a pre-work security check?	
Have you been threatened with disciplinary or legal action for violation of the Data Protection Act, or any other misuse of data or invasion of privacy?	
Do you agree that you will never, except in the proper performance of your research duties, without the express written consent of CISV International, use or disclose any confidential information concerning operations, processes, dealings, transactions, lists of participants or volunteers or other matters, which have come to your knowledge during your research with CISV International?	
Do you agree that all research results must be anonymous?	
Do you agree that you will ensure that anyone else involved in the research or having access to the data, will also comply with the above requirements for confidentiality and anonymity?	
Do you agree to participate in all CISV Leadership Training Sessions required by CISV for your role, if applicable?	
Do you agree that you will put the delegates' interests and welfare above your own while attending any CISV programme?	
Do you consent to the personal data in this Application Form being used by CISV to process this application and agree that it may be shared with other people involved in organising any programmes you may attend as part of your research?	

I have no criminal convictions or history of mental illness, emotional counselling, violent behaviour, child abuse, drug/alcohol abuse, prejudice etc that would disqualify me from participation in CISV's international, cross-cultural and peace education programmes. My signature confirms that all information provided to CISV is a true record and that I have withheld no material information.

Applicant's Signature	
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(Day / Month / Year)

If the research proposal is approved by EVR, and the research is going ahead, the applicant is asked to re-sign this document to confirm all of the above.

Confirmation	
Applicant's Signature	

(Day / Month / Year)