

## **Confidentiality and Non-Disclosure Agreement with the Reviewers**

All "Review Content" provided by the Massachusetts Association of Occupational Therapy "MAOT" ("Disclosing party") is strictly confidential. The Reviewer/s ("Receiving Party") must ensure that all "Review Content" that the MAOT entrusts to the Reviewer/s is always maintained in strict confidence. For the purposes of this agreement, "Review Content" means any information, data, course description/objectives/evaluation, brochures, schedule/agenda, resumes, works of authorship including videos, images, lectures, course materials, and syllabi, etc. The Review Content must be used only for the expressed purpose of the "Review" and making recommendations as applicable. The Reviewer/s must ensure that Reviewer/s will not, at any time, without the written consent of the MAOT: (i) disclose, directly or indirectly, any Confidential Information from the Approved Providers Application material to anyone, or (ii) use, directly or indirectly, any Confidential Information from the Approved Provider Program material that will be shared with the reviewer/s. (iii)disclose the identity and the decision (approved/not approved/conditionally approved/ineligible, etc) of the provider/s until an official decision is made by the Massachusetts Association of Occupational Therapy. The Disclosing Party makes no representation or warranty as to accuracy or completeness of the Confidential Information it discloses to the Receiving Party hereunder.

The Reviewer/s must take reasonable steps to prevent unauthorized access of any review material provided by MAOT to anyone. The Review Content must be transmitted using secure techniques, and when it is no longer required, it must be destroyed securely. Any loss, theft, unauthorized disclosure of the documentation must promptly be reported to the MAOT at info@maot.org. The reviewer/s also hereby declare that reviewer/s have no conflict of interest while participating in this review process. All conflicts of interest must be disclosed to the MAOT prior to the final decision of selecting/appointing the reviewer/s.

Provide any conflict of interest in the box below, if applicable.

This Agreement will be governed by and construed in accordance with the laws of the Commonwealth of Massachusetts within the jurisdiction of the Commonwealth of Massachusetts. By agreeing to this agreement the Reviewer/s hereby release, discharge, promise not to sue, and hold harmless MAOT and its affiliates, successors, Board Members & its appointees/ nominees, and assigns from and against any and all claims, demands, libel, slander, defamation, moral rights, invasion of privacy and/or causes of action arising out of or in connection with the Review assigned.

The Reviewer/s certify and represent that reviewer/s has/have read this agreement in its entirety and fully understand its meaning and effect. By agreeing to the review process, the "Reviewer/s" agrees to the terms and condition of this Agreement with the Massachusetts Association of Occupational Therapy.

Provide any conflict of interest/ financial and nonfinancial disclosure in this box, if applicable:

(Example: Any relationship or assiciation that might present a bias.)

I AGREE to the terms and conditions of this Confidentiality and Non-Disclosure Agreement of the MAOT - Approved Providers Program in its entirety.

Please Print/Sign/Type your name in the box below to accept the terms and conditions. (Note: Your electronic signature/sign/typing your name constitute your legal signature in accordance with the applicable laws)

| Reviewer's Signature: | Date:       |
|-----------------------|-------------|
|                       | (MM/DD/YYYY |