## DECLARACIÓN DEL MIEMBRO DEL COMITÉ DE COMPROBACIÓN DE HECHOS

Nombre y Núm. de Caso: *haga clic aquí para insertar texto*

Nombre del Miembro del Comité: *haga clic aquí para insertar texto*

Nacionalidad(es) del miembro del Comité: *haga clic aquí para insertar texto*

Acepto mi nombramiento como miembro del Comité en la presente comprobación de hechos y realizo las siguientes declaraciones:

1. A mi leal saber y entender, no hay razón alguna por la que no deba desempeñarme como miembro en el Comité constituido por el Centro Internacional de Arreglo de Diferencias Relativas a Inversiones (“el Centro”) en la presente comprobación de hechos;
2. Soy imparcial e independiente de las partes, y llevaré a cabo mi mandato con equidad.
3. No aceptaré instrucción o compensación de ninguna fuente con respecto a la comprobación de hechos, salvo en virtud de lo dispuesto en las Reglas de Comprobación de Hechos del CIADI y el Reglamento Administrativo y Financiero de Comprobación de Hechos del CIADI.
4. Entiendo que tengo la obligación de revelar:
   1. Mis relaciones profesionales, de negocios y otras relaciones significativas, en los últimos cinco años, con:
      1. las partes;
      2. los representantes de las partes;
      3. los otros miembros del Comité (de los que tenga conocimiento actualmente); y
   2. Otras circunstancias que pudieran ocasionar que se cuestione razonablemente mi independencia o imparcialidad.

[**Seleccione una opción**]:

Se adjunta una declaración.

No tengo información que revelar y no adjunto declaración alguna.

1. Reconozco que tengo la obligación continua de revelar cualquier cambio de circunstancias que pudiera ocasionar que se cuestione mi independencia o imparcialidad, y notificaré con prontitud al Secretario General sobre dichas circunstancias.
2. Mantendré la confidencialidad de toda la información que sea de mi conocimiento a consecuencia de mi participación en la presente comprobación de hechos, incluyendo el contenido de cualquier informe que emita este Comité.
3. No mantendré comunicaciones *ex parte* respecto de la presente comprobación de hechos con ninguna de las partes ni sus representantes.
4. Cuento con suficiente disponibilidad para desempeñar mis obligaciones como miembro de un Comité de manera expedita y eficiente en materia de costos. Mi disponibilidad en los siguientes 24 meses, según mi conocimiento actual, se indica abajo.
5. Confirmo que no aceptaré nuevos compromisos que pudieran estar en conflicto o interferir con mi capacidad para desempeñar mis obligaciones en la presente comprobación de hechos.
6. Cumpliré con el [Memorando de Honorarios y Gastos en los Procedimientos ante el CIADI](https://icsid.worldbank.org/es/servicios/memorando-de-honorarios-y-gastos-en-los-procedimientos-ante-el-ciadi/2022) publicado por el Centro.
7. Adjunto mi *currículum vitae* actual.

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Firma

(*firme en formato impreso o electrónico*)

*haga clic aquí para introducir la fecha*

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Fecha

**Por favor, marque en resaltado los días en los que actualmente está disponible**

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