Commission d'éthique de la recherche de l'Université de Neuchâtel
Address : Faubourg de l'Hôpital 41, 2000 Neuchâtel, CH
Website : http://www.unine.ch/unine/recherche/commission-ethique
Phone number : +41 32 718 29 04
E-mail : commission.ethique@unine.ch

New request reference number:
Revised request reference number:
Date of receipt:

For CER use only

CER assessment and information request form

Research title	
Short title / Acronym	
Proposed starting date:	Proposed ending date:

Type of request:

- ☐ Request for ethical support in relation to a research question
- ☐ Request for information
- ☐ Request for assessment of an original research project
- ☐ Revised request for assessment
  Initial request reference number:

Please complete only relevant sections.
Requests for information or support: see especially section G where you can enter your questions.

Place, date:
Signature of the principal investigator:
Signature of the supervisor if the principal investigator is a student:

For CER use only	
1) Thorough assessment	☐
2) Simplified assessment	☐
3) CER president's assessment	☐

Decision:

- ◯ Proposal to refer to the CER-VD
- ◯ Unconditional positive assessment
- ◯ Positive assessment with proposed modifications
- ◯ Provisional positive assessment with requests for modifications
- ◯ Request for additional information
- ◯ Negative assessment

Date:

4) Information / support to be provided by

- CER Secretariat ☐
- CER president ☐
- CER ☐

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A: GENERAL ISSUES AND DOCUMENTATIONS

1) For which reason(s) do you request an assessment of your research by the CER?
   a. I am planning a request for funding — YES ◉ NO ○
   b. I am planning a publication of research findings — YES ○ NO ◉
   For other reasons — YES ○ NO ◉
   If so, please specify (500 words max.):

2) The proposed research involves
   a. An impact on the participants' health — YES ◉ NO ○
   b. An impact on the participants' behaviour and/or environment — YES ○ NO ◉
   c. The participation of vulnerable individuals and/or populations — YES ○ NO ◉
   d. The use of personal data on the participants' health — YES ○ NO ◉
   e. The use of human biological material — YES ○ NO ◉
   The use of sensitive data not related to health — YES ○ NO ◉
   If so, please specify (500 words max.):

   g. The use of animals — YES ○ NO ○
   Other — YES ◉ NO ○
   If so, please specify (500 words max.):

3) The proposed research involves risks — YES ◉ NO ○
   If so, describe the level of risk:
   a. Damage to health — low ○ medium ○ high ○
   b. Violation of human dignity — low ○ medium ○ high ○
   c. Linked to the use of personal data — low ○ medium ○ high ○
   d. Other — low ○ medium ◉ high ○
   If so, please specify (500 words max.):

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4) Describe the ethical issues that the research could involve and explain how you plan to deal with them. These issues can, for example, be relative to the participants' informed consent, to data confidentiality and anonymization, to the protection of vulnerable populations, to the protection against damage, to participants' rights to withdraw from the study, to the storage of sensitive data, etc.

5) Have you requested ethical clearance from another REC? YES ◯ NO ◯
If so, was the assessment:
Positive ◯
Conditional ◯
Negative ◯

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CHECKLIST

Documents attached to the application form	Attached	Not relevant
Section A: General issues and documentations		
Previous assessment of a REC (Swiss or abroad)	◯	◯
Section B: Personal data		
CV and publication list of principal investigator	◯	◯
CV and publication list of co-investigator(s)	◯	◯
Section C: Description of the study		
Scientific part of research project if submitted to SNSF or another funding agency	◯	◯
Questionnaire(s) / Psychological test(s) / Interview guidelines	◯	◯
Documentation relative to internal and/or external collaborations (e.g., contracts, agreements on data protection, etc.)	◯	◯
Section F: Recruitment and consent forms		
Recruitment documentation (flyers, posters, e-mails, etc.)	◯	◯
Information sheet(s)	◯	◯
Consent form(s)	◯	◯
Other (Please specify)		
	◯	◯

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B: PERSONAL DATA

1) **Principal investigator (enclose a full CV)**
Title:
Last name:
First name:
Position held:
Institute / department:
Professional address:
Phone number:
E-mail address:

ADD A CO-INVESTIGATOR
Co-investigator (enclose a full CV)
Affiliated with UniNE? YES◯ NO◯ If no, specify your affiliation:
Title:
Last name:
First name:
Position held:
Institute / department:
Professional address:
Phone number:
E-mail address:

2) **Scientific collaborator**
Affiliated with UniNE? YES◯ NO◯ If no, specify your affiliation:
Title:
Last name:
First name:
Position held:
Institute / department:
Professional address:
Phone number:
E-mail address:

ADD A SCIENTIFIC COLLABORATOR
Affiliated with UniNE? YES◯ NO◯ If no, specify your affiliation:
Title:
Last name:
First name:
Position held:
Institute / department:
Professional address:
Phone number:
E-mail address:

External partner
Affiliation:
Title:
Last name:
First name:
Position held:
Institute / department:
Professional address:
Phone number:
E-mail address:

ADD EXTERNAL PARTNER
Affiliation:
Title:
Last name:
First name:
Position held:
Institute / department:
Professional address:
Phone number:
E-mail address:

4) **Funding source**
Name of funding agency:
Funding request: sent ◯ in preparation ◯
Requested amount: CHF
Reply: pending ◯ acceptance ◯ rejection ◯
In case of a rejection, please specify for which reason(s) (500 words max.):

ADD A FUNDING SOURCE
Name of funding agency:
Funding request: sent ◯ in preparation ◯
Requested amount: CHF
Reply: pending ◯ acceptance ◯ rejection ◯
In case of a rejection, please specify for which reason(s) (500 words max.):

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C: DESCRIPTION OF THE STUDY

1) Project summary (500 words max.)

2) Description of the study: please describe the research protocol, intended fieldwork, methodology for data collection and/or intended analytical procedures. Give details of any samples or measurements to be taken.

Attach any questionnaires, psychological tests, interview guidelines, scientific part of the project if submitted to SNSF, etc.

3) Have collaborating institutions and departments whose resources will be used within the study been informed and agreed to participate?
YES◯ NO◯
Comments (500 words max.):

Attach all relevant documentation.

4) How and to whom is it intended to disseminate the results?
(several answers are possible)
Publications in peer reviewed journals ☐
Open Access reports ☐
Presentations at international or national conferences ☐
Presentations to and/or publications for professional organizations ☐
Presentations to and/or publications for policy makers ☐
Presentations to and/or publications for the study participants ☐
Presentations to and/or publications for any interested parties ☐
Website (URL:) ☐
Other (specify):) ☐

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5) Are there any restrictions by, for example, data providers on the dissemination of the study findings?
YES ◯ NO ◯
If so, please describe the nature of the restrictions.

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D: DATA PROTECTION

1) What measures are taken to be compliant with the Federal Act on Data Protection?
Specify (500 words max.):

2) Where will the data collection take place?

In Switzerland	YES ◯	NO ◯
In the European Union	YES ◯	NO ◯
Please specify in which countries:		
Elsewhere	YES ◯	NO ◯
Please specify in which countries:		

3) Where will the data be stored and processed?

In Switzerland	YES ◯	NO ◯
In the European Union	YES ◯	NO ◯
Please specify in which countries:		
Elsewhere	YES ◯	NO ◯
Please specify in which countries:		

4) If data held by a third party will be used, please explain how you will get access to these data (500 words max.)

Can you confirm that the data obtained from a third party have been collected in accordance with the Federal Act on Data Protection? YES ◯ NO ◯

Comments:

E: DESCRIPTION OF STUDY PARTICIPANTS

1) Will UniNE students be involved as participants in the study? YES ◯ NO ◯

2) Number of participants:
Participants' lower age limit during data collection:
Participants' upper age limit during data collection:
Please justify the sample size and age range:

3) Will the study include children or vulnerable adults (e.g., individuals with learning difficulties, mental health problems, illegal statuses, etc.) YES ◯ NO ◯
If so, please specify what type of population will be involved and why (500 words max.)

4) Detail how you will ensure that the participants are able to give informed consent.

Will you get the parents' and/or legal representatives' consent? YES ◯ NO ◯
If so, in what form?

5) Which criteria are used for including and excluding participants to the study?
Inclusion criteria:
Exclusion criteria:
Not applicable ☐

6) Does the study involve partial disclosure or deception? YES ◯ NO ◯
If so, explain why and specify how you will ensure to get the participants' informed consent once data collection is completed.

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F: RECRUITMENT AND CONSENT FORMS

1) Attach a copy of any flyers, posters, e-mails, etc. that will be used to recruit participants.
If no written/electronic support will be used, please explain how you will proceed:

2) Attach a copy of the information sheet given to participants. For studies involving partial disclosure or deception, please attach information given both at the beginning and at the end of the study.
If no information sheet is to be given to participants, please explain why:

3) Will you obtain written consent for participation to the study? YES◯ NO◯
If so, please attach a copy of the consent form. For studies involving partial disclosure or deception, please attach consent forms provided both at the beginning and at the end of the study.
If no, please explain why.

4) Will you reward the participants for their participation? YES◯ NO◯
If so, please specify (payment amount, payment source, source and nature of gift, etc.).

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G. QUESTIONS

Please write down here any questions you would like to address to the CER.