Faculty of
Mathematics and Computer Science
Saarland University

Evaluation of research projects by the ethical review board of the Faculty of Mathematics and Computer Science, Saarland University

Basic Questionnaire

For each relevant study every executive researcher has to complete and sign this basic questionnaire, if an evaluation by the ethics commission is required. If the researcher is a student, the basic questionnaire must be additionally signed by the responsible supervisor.

Abbreviated designation of the study:

_____

1. General data

This is a (series of) study(ies), which is (are) to be performed in the following context (please check):

- ☐ Study, e.g. internship or project
- ☐ Bachelor thesis
- ☐ Master thesis
- ☐ Dissertation
- ☐ Habilitation
- ☐ Research project (e.g. funded project)
- ☐ Other (please specify) _____

Executive researcher:

Name, given name(s): _____

Research group: _____

Email address: _____

Status (please check):

- ☐ Student bachelor's degree
- ☐ Student master's degree
- ☐ Research assistant
- ☐ Other (please specify): _____

Responsible supervisor, if applicable:

Name, given name(s): _____

Research group: _____

Email address: _____

Is this study about human subject research?

- ☐ no
- ☐ yes (please fill out subsection 1)

Is this study using personal data?

- ☐ no
- ☐ yes (please fill out subsection 2)

If you negated both questions, please explain your project and the ethical issue in an extra document (e.g. if it is a project with a military connection).

Subsection 1: Human subject research

Affiliation to other studies

a) Is this a study within the framework of a project or another study for which a vote of the ethical review board is already available or is the current planned study designed analogue to a study for which an approval of the ethical review board is already available?

- ☐ no (continue with checklist)
- ☐ yes

If yes, please indicate the abbreviated designation of the study:

_____

Supervisor of the study for which a vote of the ethical review board is already available:

_____

b) Has the design been altered concerning relevance of the responses in this checklist?

- ☐ no (please sign)
- ☐ yes

If yes, please explain in a separate document which modifications have been made.

Checklist 1

Comments:
Detailed information on individual topics can be seen on the following website of the ethics guidelines of the German Psychological Society (DGPs):
http://www.dgps.de/index.php?id=185
If one or more of questions 1–9 on the checklist have been answered with yes, please describe the study scheme in a separate document and particularly go into detail about the necessity of the point(s) answered with yes. Please go also into detail about how you will ensure compliance with the ethics guidelines regarding these point(s).

	yes	no
1. Does the study necessarily involve participants who are unable to give informed consent (e.g. people under the age of 18 or people unable to consent in a legal sense)?		
2. Does the study necessarily involve participants who belong to a particularly vulnerable group (e.g. participants of clinical samples, people with learning disabilities, residents of a hospital or nursing home or people serving a sentence)?		
3. Is it necessary that people participate without being informed about their participation or without having given informed consent (e.g. covert observation) at this point?		
4. Is it necessary that the participants are not entirely informed about purpose and content of the study? (Remark: the entire information does not imply the disclosure of the hypothesis but refers to the purpose and procedure of the study. For example, an incomplete or false information is on hand if a cover story is necessary to be able to address the questioning).		
5. Is it necessary actively to mislead people concerning the purpose of the study?		
6. Is it necessary to ask questions on subjects of an intimate nature for the respondents or the answer to which could be conceived as stigmatizing (e.g. relating to illegal or deviant behavior)?		
7. Is it expected that participants are going to suffer from physiological stress, anxiety, exhaustion, physical pain or other negative effects beyond the anticipated everyday life dimension?		
8. Does the study involve the administration of medicine, placebo or any other substances?		
9. Will the participants be subject to any invasive or potentially harmful procedures?		
10. Will personal data be collected which cannot be processed anonymously (e.g. video or audio recordings of the participants, collection of body substances such as saliva samples)? If yes, please specify what kind of data: _____ Will the participants be informed about this? ☐ yes ☐ no May the participants demand the deletion/destruction of this data at any time and will they be informed about this? ☐ yes ☐ no Will this data only be stored internally? ☐ yes ☐ no		

If question 10 has been answered with yes, please answer directly the corresponding additional questions. If in question 10, one or both additional question(s) have been answered with no, please describe in a separate document why this is necessary and how you will ensure compliance with the ethics guidelines regarding these point(s).

Please note that in any case it is necessary to inform participants in as detailed a manner as possible about the procedure of the study in advance, to collect their informed consent and to ensure confidentiality of the data collection and storage. Forms for clarification and informed consent must be attached to this application. The ethical review board must be consulted again in case of essential modifications of the study emerging in the course of the data collection.

Place, date	Signature of the executive researcher
Place, date	(If applicable) Signature responsible supervisor

If this study is using personal data:

Subsection 2

	yes	no
1. Can you ensure that all personal data is processed and stored anonymously?		
2. Did you check if the quality and extent of used data is appropriate according to the study (economical use)?		
3. Did you check if the data will be used legally?		
4. Will personal data be collected which can't be processed anonymously (e.g. video / audio recordings of participants, removal of body substances like salvia sample)? If yes, which data: _____ Will the participants be informed about this? ☐ yes ☐ no Can the participants demand a disposal of this data and will they be informed about this as well? ☐ yes ☐ no Will this data only be stored internally? ☐ yes ☐ no		
5. Does the research contain the processing of already collected personal data?		

I certify that all information in this application is accurate to the best of my knowledge.

If you negated one or more of the questions 1-3 of this subsection, please describe in a separate document the issue which prevents an answer with yes. Please consider for this purpose the data protection law of Saarland:
http://www.saarland.de/dokumente/thema_justiz/205-4.pdf

_____ _____

Place, date Signature of the executive researcher

_____ _____

Place, date (If applicable) Signature responsible supervisor