UNIVERSITY OF OTTAWA
HEART INSTITUTE
INSTITUT DE CARDIOLOGIE
DE L'UNIVERSITÉ D'OTTAWA

Responsible Conduct of Research (RCR) Allegation Submission Template

1. Complainant Information

Complainant: The individual who is reporting a potential breach of Tri- Agency and/or institutional policy.

I am submitting this allegation anonymously:	☑ Yes* ☐ No
Name of Complainant:	
Institution / Organization (if applicable):	
Position with respect to the Respondent:	
Email address:	
Phone:	

** Anonymous allegations will be accepted if accompanied by sufficient information to enable the assessment of the allegation and the credibility of the facts and evidence, without the need for further information from the complainant.*

2. Respondent Information

Respondent: The individual who is identified in the allegation as having possibly breached Tri-Agency and/or institutional policy.

Name(s) of Respondent(s):	
Name of Institution(s):	
Position(s) at Institution:	
Email address of Respondent(s), if known	

3. Allegation

An allegation should be based on facts which have not been the subject of a previous investigation. Please refer to policy 6-20 Addressing Allegations of Breach of Policy in Research and the Tri-Agency Framework: Responsible Conduct of Research for information on processes for reporting and investigating breaches of policy .

Breach of the Tri-Agency Framework: Responsible Conduct of Research (Please refer to Article 3.1 of the RCR Framework for the definition of these breaches). Check all that apply.	☐ Fabrication ☐ Falsification ☐ Destruction of research records ☐ Plagiarism ☐ Redundant publications/self-plagiarism ☐ Invalid authorship ☐ Inadequate acknowledgment ☐ Mismanagement of conflict of interest ☐ Misrepresentation in an Agency application or related document ☐ Mismanagement of grant or award funds ☐ Breach of Agency policies or requirements for certain types of research ☐ Breach of Agency review process Other: _____

Summary of Allegation	
Has this allegation been submitted to any other institutional official(s) within the institution? *(This information is optional.)*	☐ Yes ☐ No *If yes, please indicate to whom the allegation was sent and the date on which it was sent.* Name and position: Date sent:
To the best of your knowledge, have the facts of this allegation been the subject of a previous investigation?	☐ Yes ☐ No

4. Supporting Documentation

Please attach all supporting documentation and information related to the alleged breach, if available. If you are submitting the allegation anonymously, please ensure to include all relevant documentation to enable the assessment of the allegation and the credibility of the facts and evidence on which the allegation is based.

List supporting documents and information:	

As a Complainant, I understand the importance of confidentiality of the RCR process and of all affected parties. By submitting this form, I declare that this allegation is based on facts which have not been, to the best of my knowledge, the subject of a previous investigation. I also declare that this allegation is made in good faith.

☐ Yes ☐ No

_____ _____

Signature of Complainant
(not required if allegation is being submitted anonymously

Date Submitted

Please submit this completed form to the Chief Scientific Officer, Dr. Katey Rayner, with a copy to RCR@ottawaheart.ca.