

Appendix 9.4 – Declaration Form and Checklist

Please print this declaration form and obtain the required signatures. If your HREC is affiliated with multiple institutions, please ensure that each Head of Institution signs the Declaration Form. Once completed, this form should be re-scanned into an appropriate electronic format and sent to hrep@nhmrc.gov.au in conjunction with the self-assessment and nomination forms.

Declarations

Head of Institution

I confirm that, to the best of my knowledge, all information contained in this form and the attached self-assessment tool, is correct and accurate. I nominate the ethical review processes of this institution for certification. I understand that the ethical review of multi centre human research carried out by this institution's HREC may be used by other institutions to fulfil their obligations under the National Statement and inform their decision on the conduct of research at their institution. I authorise staff and members of the Human Research Ethics Committee to co-operate with the certifying body including sharing confidential institutional information relevant to the ethical review process and institutional support. I acknowledge a confidentiality and conflicts of interest declaration will be provided to the certifying body by assessors conducting on-site visits.

Signature of Head of Institution	
Date	
Print name of Head of Institution	

Chair of Human Research Ethics Committee

I confirm that, to the best of my knowledge, all information contained in this Form, as it relates to the ethical review process of the Human Research Ethics Committee that I Chair is correct and accurate. I understand that certification of the ethical review outcome of the deliberation of the Committee that I Chair may be used by other institutions to fulfil their obligations under the National Statement and inform their decision on the conduct of research at their institution. I attest that all members of the Committee have the same understanding.

Signature of Chair of Human Research Ethics Committee	
Date	
Print name of Chair of Human Research Ethics Committee	

Checklist

Once completed, these forms should be sent electronically to hrep@nhmrc.gov.au with the words DOCUMENTATION FOR CERTIFICATION (INSTITUTION NAME) in the subject field. Documents must be submitted as an attachment, web links to documents are not acceptable. Please ensure all items have been attached and are clearly labelled.

- | | |
|---|---|
| <input type="checkbox"/> Self-assessment form completed | <input type="checkbox"/> Standard Operating Procedures for managing Conflicts of Interest with respect to ethical review |
| <input type="checkbox"/> Nomination form completed and signed | <input type="checkbox"/> Standard Operating Procedures for ethical review and administration of ethical review |
| <input type="checkbox"/> Declaration form completed and signed | <input type="checkbox"/> Institutional Policy on withdrawal of ethical approval |
| <input type="checkbox"/> HREC and relevant subcommittee Terms of Reference | <input type="checkbox"/> Policies and procedures on monitoring the conduct of proposals involving clinical trials and/or clinical interventional research |
| <input type="checkbox"/> HREC Conflict of Interest Declaration(s) template | |
| <input type="checkbox"/> Institutional policies on disclosure and management of Conflicts of Interest | |

List below all documents provided with your institutions nomination below.

Attachment number	Name
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