**7.5 Ethical examination form**

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| --- | --- | --- |
|  | **Name of person initiating the examination procedure:** |  |
|  | Academic rank: |  |
|  | Place of work (Faculty/Institute/Department): |  |
|  | Position:Public servant at ELTE yes/no[[1]](#footnote-1) |  |
|  | E-mail address: |  |
|  | Title or research (to be examined): |  |
|  | Field(s) of research (to be examined): |  |
|  | Head of research (to be examined, name): |  |
|  |  Place of work (head of research) (Faculty/Institute/Department): |  |
|  | Position:Public servant at ELTE yes/no[[2]](#footnote-2) |  |
|  | Date of submission of the examination form: |  |
|  | Supposed breach of the norms of ethics/research integrity: |  |
|  | List of available evidences (please attach them): |  |

1. If not a public servant at ELTE, by filling in the Research integrity application form you give your consent to the processing of your personal data in the application form by the Research Integrity, Research Ethics and Data Processing Committee. [↑](#footnote-ref-1)
2. If not a public servant at ELTE, by filling in the Research integrity application form you give your consent to the processing of your personal data in the application form by the Research Integrity, Research Ethics and Data Processing Committee.

 [↑](#footnote-ref-2)