Appendix

**Allegation Form**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attn: Allegation Contact Point

|  |  |
| --- | --- |
| Complainant  \*Please identify your name (cannot be anonymous) | Affiliation:  Name:  Address:  TEL: |
| Desired Contact Method  (Select and fill in at least one) | E-mail: (Home / Work / Mobile)  FAX: (Home / Work)  Postal Mail: 〒　　　– (Home / Work) |

I hereby make the following allegation pursuant to 6., (1), ② of the Tohoku University Guidelines for Measures against Misconduct in Research Activities.

|  |  |  |
| --- | --- | --- |
| Description of allegation | 1. Respondent | Name of affiliated institution:  Name of respondent: |
| 2. Description of allegation | (1) Around when did the misconduct take place?  (2) Please describe how you became aware of the misconduct.  (3) Please describe the specific nature of the misconduct.  \*Please provide as many details on each item as possible. If there is not enough space, please supplement additional pages as appropriate, or create an appendix. |
| 3. Availability of Evidence | Yes No  \*If “yes,” please attach the relevant materials. |

\* You will not receive disadvantageous treatment for the sole reason that you made an allegation. (However, if it becomes evident as a result of the investigation that the allegation was based on wrongful intent, you may be subject to measures, such as disciplinary action.)

\* Your name and other personal information will be used only to the extent that it is necessary, including for communication between the complainant and the contact point, and the information will be properly protected. The name of the complainant and other information will not be made known to those other than the parties relevant to the investigation.