**Regional research management Platform within Ethics Committees and Local Health Trusts of the Regional Health Service of Emilia-Romagna (SIRER)**

**Platform access request form for Promoters and CROs**

The application form for registration to the platform, completed and signed, must be sent, together with the form "Conditions of use of the platform and privacy information", to [assistenza.sirer@lepida.it](mailto:assistenza.sirer@lepida.it) , indicating in the subject of the email: " Census Request on the Platform (insert name of Promoter / CRO) ". **This form allows the promoter / CRO to be profiled in SIRER.** The writer must attach a proxy letter signed by the legal manager of the entity / company (promoter / CRO) for which he works.

If the **writer** needs **direct** **access** to the platform, indicate in the subject of the e-mail: "Request for Census on the Platform (insert name of Promoter / CRO) and login credentials (Surname Name of writer)".

Once the registration procedure is completed, the writer will be able to access the SirER platform using the public digital identity system (SPID) or username and password provided.

*The undersigned:*

|  |  |
| --- | --- |
| Name |  |
| Surname |  |
| e-mail address |  |
| Phone number |  |
| Tax number |  |

On behalf of the Applicant:

|  |  |
| --- | --- |
| Type of Applicant | [ ] CRO [ ] PROMOTER |
| Full designation |  |
| Type of Promoter | [ ] COMMERCIAL [ ] NON-COMMERCIAL |
| VAT registration number |  |
| State |  |
| Region |  |
| Province |  |
| Municipality/City |  |
| Address |  |
| Applicant’s legal representative details | |
| Name |  |
| Surname |  |
| Date of birth |  |
| State of residence |  |
| City and permanent address |  |
| e-mail |  |
| Position |  |

Promoter details (if different from Applicant)

|  |  |
| --- | --- |
| Full designation |  |
| Type of Promoter |  |
| VAT registration number |  |
| State |  |
| Region |  |
| Province |  |
| Municipality/City |  |
| Address |  |

**Applicant/Promoter applies for accessing SIRER Platform, agreeing to comply with the terms and conditions set out in our “Platform Terms and Conditions of use” available online.**

**OPTIONAL REQUEST (tick only if necessary)**

Direct access to the Platform: Application for activation of the system user associated with the writer

* It also asks to be registered as a user with a profile associated with the Promoter / CRO

It should be noted that this optional operation will allow the Writer to obtain personal credentials to access the Platform, with the display of the information uploaded to the System, with reference to the areas of exclusive competence and as indicated in the "Platform Conditions of Use" form.

Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please, attach:

* Proxy letter of the Applicant in favour of the User;
* Platform Terms and Conditions of use and Privacy Policy both signed by the Applicant and the User.