Statutes of the German International University in Berlin

on Ensuring Good Scientific Practice and Dealing with Suspected Cases of Scientific Misconduct

from 11.12.2024

Pursuant to § 2 (1) of the Berlin Higher Education Act (BerlHG) of July 26, 2011 (GVBl. p. 378), last amended on March 23, 2023 (GVBl. p. 121), the University Council of the German International University in Berlin (GIU) has adopted the following statutes. These statutes are based on:

- *The "Guidelines for Safeguarding Good Scientific Practice" by the German Research Foundation (DFG), version of August 2019,*
- *The model statutes of the German Rectors' Conference (HRK) for ensuring good scientific practice and dealing with suspected cases of scientific misconduct, adopted as a resolution by the 33rd General Assembly of the HRK on May 10, 2022.*

Preamble

The members of the German International University in Berlin (GIU) regard safeguarding good scientific practice in research and teaching as one of their highest priorities. These statutes, based on the recommendations of the German Research Foundation (DFG) and the model statutes of the German Rectors' Conference (HRK) for ensuring good scientific practice and handling suspicions of scientific misconduct, outline the principles of good scientific practice and establish fair procedures in cases of suspected violations.

Integrity is the fundamental principle of scientific work, serving both as an ethical norm and the foundation of scientific professionalism. It is the university's core responsibility to convey these principles to all individuals involved in research. Adherence to and implementation of good scientific practice are prerequisites for recognized and ethically sound scientific work that can withstand international scrutiny.

The GIU requires all its scientific members to acknowledge the importance of these statutes upon joining and integrates these principles into teaching and research. Any concrete suspicion of scientific misconduct will be promptly investigated, and appropriate measures will be taken if the suspicion is confirmed. Establishing a culture of scientific integrity is a central goal of the GIU, aiming to enhance research quality and strengthen trust in science.

The following regulations implement the "Guidelines for Safeguarding Good Scientific Practice" of the German Research Foundation (DFG), version of August 2019. They are legally binding for all individuals conducting research within the GIU.

Part I: Principles of Good Scientific Practice

§ 1 Scope of These Statutes

(1) The principles of good scientific practice to be adhered to under these statutes are communicated to GIU staff through the university's website. Additionally, all academic employees, whether contractually employed or in civil service, will be informed of the enactment of these statutes via email.
(2) All individuals engaged in scientific activities at GIU are obliged to adhere to and are responsible for observing the rules of good scientific practice.
(3) These statutes do not affect employment and civil service rights and obligations.

§ 2 Specific Principles of Good Scientific Practice

The principles of good scientific practice include, in particular:

1. Working in accordance with recognized scientific standards ("lege artis"),
2. Maintaining strict honesty regarding one's own contributions and those of others,
3. Consistently questioning all results, and
4. Allowing and promoting critical discourse within the scientific community.

§ 3 Professional Ethics of Scientific Staff

(1) The foundation of good scientific practice is imparted as early as possible during scientific education (including teaching) and career progression.
(2) Scientific staff uphold the fundamental values of scientific work.
(3) Across all career levels, scientific staff undergo a continuous process of learning and further development regarding good scientific practice, exchange ideas, and support one another.

§ 4 Organizational Responsibility of University Leadership

(1) The university leadership holds the responsibility and organizational accountability for ensuring compliance with good scientific practice at the university.
(2) The university leadership establishes the framework for rule-compliant scientific work at the university by implementing an appropriate institutional organizational structure. In doing so, the university leadership creates the conditions necessary for scientific staff to adhere to legal and ethical standards.
(3) At GIU, clear procedures and principles for personnel selection and development are defined in writing through the following measures, with special emphasis on equal opportunities and diversity:
    - *The current version of GIU's Gender Equality Concept,*
    - *The Diversity Strategy: Equal Opportunities at the German International University.*
(4) To support early-career researchers, the following mentoring structures and concepts are established:
    - *Workshops and advisory services on "Good Scientific Practice," Supervisory agreements based on DFG recommendations.*

§ 5 Responsibilities of Heads of Research Units

(1) The head of a scientific work unit is responsible for the entire unit under their leadership.
(2) The responsibilities of the head of a scientific work unit include, in particular, the obligation to provide individual mentoring of early-career researchers within the overall framework of the university, to promote the careers of scientific and support staff, and to convey the principles of scientific integrity.
(3) Collaboration within scientific work units is structured in such a way that the unit as a whole can fulfill its tasks, ensure the necessary cooperation and coordination, and make all members aware of their roles, rights, and responsibilities.
(4) Abuse of power and exploitation of dependency relationships are countered through appropriate organizational measures both at the level of individual work units and at the university leadership level.
(5) Scientific staff benefit from a balance of support and autonomy appropriate to their career stage.

§ 6 Evaluation of Scientific Performance

The evaluation of the performance of scientific staff follows a multidimensional approach. A significant component of the evaluation is scientific performance, which is primarily assessed based on qualitative criteria. Quantitative indicators may also be included in the overall evaluation in a differentiated and reflective manner. In addition to scientific performance, other aspects may also be taken into account.

§ 7 Cross-Phase Quality Assurance

(1) Scientific staff perform each step of the research process in accordance with lege artis principles. Continuous and cross-phase quality assurance is conducted.
(2) The origin of data, organisms, materials, and software used in the research process must be clearly indicated by citing the original sources, along with documentation of the conditions for reuse. If publicly available software is utilized, it must be persistently and citable, with the source code documented, where feasible and reasonable.
(3) The type and scope of research data generated during the research process must be described.
(4) An essential component of quality assurance is ensuring that other scientific staff can replicate results or findings.
(5) When scientific findings are made publicly accessible (including through means other than publications), the mechanisms of quality assurance applied must always be disclosed. If discrepancies or errors are later identified or pointed out in these findings, they must be corrected.

§ 8 Involved Parties, Responsibilities, and Roles

(1) The roles and responsibilities of scientific staff involved in a research project must be appropriately defined and remain clear at all times.
(2) If necessary, adjustments to roles and responsibilities shall be made.

§ 9 Research Design

(1) Scientific staff must thoroughly consider and acknowledge the current state of research when planning a project. This typically requires careful investigation of publicly available research findings.
(2) The university leadership ensures the necessary framework for such research is provided within the scope of its budgetary capabilities.
(3) Scientific staff must apply methods to avoid (including unconscious) biases in the interpretation of findings, insofar as this is feasible and reasonable.
(4) Scientific staff must also examine whether and to what extent gender and diversity may be relevant to the research project.

§ 10 Legal and Ethical Framework for Research

(1) Scientific staff must exercise their constitutionally granted freedom of research responsibly.
(2) The university leadership ensures that the actions of members and affiliates of the university comply with regulations and promotes compliance through appropriate organizational structures. The university leadership has established the following binding principles for research ethics:
    - *GIU establishes an ethics committee to regulate key principles of research ethics. The committee's role is to review proposed or ongoing research studies to protect the dignity, rights, safety, and well-being of all actual or potential research participants, as well as those who may be affected by the research outcomes.*
(3) Scientific staff must observe their rights and responsibilities in their conduct, particularly those arising from legal requirements and contracts with third parties.
(4) Scientific staff must obtain necessary approvals and ethical clearances, where required, and submit them to the appropriate authorities.
(5) Scientific staff must remain continuously aware of the risk of misuse of research findings, particularly in safety-relevant research. They must thoroughly assess the potential consequences of their research and evaluate its ethical implications.

§ 11 Usage Rights

(1) Scientific staff must establish documented agreements regarding the usage rights of data and results derived from the research project at the earliest possible stage.
(2) The use of data and results is primarily reserved for the scientific staff who collected the data.
(3) The rights holders are responsible for determining whether and how third parties may access the research data.

§ 12 Methods and Standards

(1) In research, scientifically sound and transparent methods must be applied.
(2) When developing and applying new methods, scientific staff must place particular emphasis on quality assurance and the establishment of standards.

§ 13 Documentation

(1) Scientific staff must document all information relevant to the development of a research result in a manner that is as transparent as required and appropriate for the respective discipline. This ensures that results can be reviewed, evaluated, and replicated. If specific professional recommendations exist for review and evaluation, scientific staff must prepare the documentation according to these guidelines. In the development of research software, its source code must also be documented where feasible and reasonable.

(2) Individual results that do not support the original hypothesis must also be documented as a rule. Selective reporting of results is prohibited.

(3) If the documentation does not meet the requirements under paragraphs 1 and 2, the limitations and reasons for this must be clearly explained.

(4) Documentation and research results must not be manipulated and should be protected as effectively as possible against any form of manipulation.

§ 14 Public Access to Research Results

(1) In principle, scientific staff contribute all their results to the scientific discourse.

(2) In individual cases, there may be reasons to withhold public access to results. The decision on public accessibility must generally not depend on third parties; rather, scientific staff make this decision independently, considering the practices of their specific discipline, as well as the if, how, and where to make their results publicly accessible. Exceptions are particularly permissible where third-party rights are involved, patent applications are anticipated, the research is contract-based, or it involves security-relevant research.

(3) When results are made publicly accessible, they must be described comprehensively and transparently, avoiding overly fragmented publications. This also includes making the underlying research data, materials, information, methods used, and software available, where feasible and reasonable. This is done according to the FAIR principles: Findable, Accessible, Interoperable, and Re-Usable. Exceptions are permissible in the context of patent applications.

(4) Custom-developed software must be made accessible, including its source code, where feasible and reasonable. Licensing may be required where applicable. Workflows must be described comprehensively.

(5) Both one's own and third-party prior work must be fully and accurately cited, unless disciplinary conventions allow exceptions in the case of one's own previously publicly accessible results. Additionally, repetition of content from prior publications should be limited to what is necessary for comprehension.

§ 15 Authorship

(1) An author is defined as someone who has made a genuine and identifiable contribution to the content of a scientific text, data, or software publication. Whether a contribution qualifies as genuine and identifiable depends on the specific principles of scientific work within the respective discipline and must be assessed on a case-by-case basis.

(2) A genuine and identifiable contribution is considered to have been made, particularly if a scientific individual has contributed in a scientifically significant way to:

- *Design and development of the specific research activities described and evaluated in the publication (not: merely applying for or acquiring funding for overarching framework projects, institutional units, or equipment, or simply holding a leadership or supervisory position within the research institution), or*
- *Independent acquisition and processing of data, sourcing of materials, or programming of software (not: merely performing technical routine tasks or implementing predefined data collection formats), or*
- *Independent analysis, evaluation, or interpretation of data, sources, or results (not: merely listing data or compiling sources), or*
- *Development of conceptual approaches or argumentative structures (not: merely advising on others' drafts or providing general suggestions), or*
- *Drafting the manuscript (not: merely making editorial adjustments or language corrections).*

(3) If a contribution does not meet the criteria for authorship, the support can be acknowledged appropriately in footnotes, prefaces, or acknowledgments. Honorary authorship, where no sufficient contribution has been made, is prohibited, as is attributing authorship solely based on a leadership or supervisory position.

(4) All authors must approve the final version of the work to be published and share joint responsibility for the publication unless explicitly stated otherwise. Approval for publication must not be unreasonably withheld; any refusal must be substantiated with verifiable criticism of the data, methods, or results.

(5) Scientific staff must reach an agreement regarding authorship of the research results in a timely manner—typically no later than the manuscript drafting stage. The agreement must be based on transparent criteria and take into account the conventions of each discipline.

§ 16 Publication Platforms

(1) The scientific quality of a contribution is not dependent on the publication platform where it is made publicly accessible. In addition to publications in books and academic journals, other options such as specialized, data, and software repositories, as well as blogs, are also valid.

(2) Authors must carefully select the publication platform, considering its quality and visibility within the respective field of discourse. Any new publication platform must be evaluated for its credibility.

(3) Anyone undertaking an editorial role must carefully assess the publication platforms for which they assume responsibility.

§ 17 Confidentiality and Neutrality in Reviews and Advisory Processes

(1) Integrity is the foundation of the legitimacy of any decision-making process.

(2) Scientific staff involved in reviewing manuscripts, grant applications, or assessing the qualifications of individuals are strictly bound to confidentiality. They must promptly disclose any facts that may raise concerns about potential conflicts of interest to the responsible authority.

(3) Confidentiality includes ensuring that information accessed in the course of these functions is neither disclosed to third parties nor used for personal purposes.

(4) Paragraphs 1 and 2 apply equally to members of scientific advisory and decision-making committees.

§ 18 Archiving

(1) Scientific members of the GIU must preserve research data and results that are made publicly accessible, along with the essential underlying materials. These must be stored in an accessible and transparent manner within the institution where they were generated or in cross-site repositories provided by the GIU. The standards of the relevant discipline govern the archiving process. Typically, research data to be archived are saved as raw data.
(2) Research data and results are generally retained for a period of 10 years. The retention period begins on the date when the respective data or results are made publicly accessible.
(3) Paragraphs 1 and 2 also apply to research software used in the process.
(4) If valid reasons exist for not retaining certain data or retaining them for a shorter period than specified in paragraph 2, scientific staff must clearly and transparently document these reasons.
(5) The university leadership is responsible for ensuring that the necessary infrastructure for proper archiving is available.

Part II Ombudspersons System

§ 19 Ombudspersons

(1) At GIU, there is one ombudsperson and an equal number of deputy ombudspersons. Deputies are appointed to act in cases where there are concerns about bias involving the primary ombudsperson or if the primary ombudsperson is unable to perform their duties. The question of whether there is a concern about bias is assessed in accordance with § 21 of the Administrative Procedure Act (VwVfG) of the state in connection with § 1 (1) of the VwVfGBln. In cases of doubt, the investigation commission, as outlined in Section III, makes the decision.
(2) Individuals eligible for appointment as ombudspersons or deputies must be reputable scientists with leadership experience. The appointment should take into account the academic cultures represented at the university. Ombudspersons and their deputies may not, during their term of office, be members of the investigation commission or any leadership body of the GIU, such as the university leadership or deanships.
(3) Appointments are made by the university leadership following an election by the University Council of GIU.
(4) The term of office for an ombudsperson or deputy is generally three years. A single reappointment for an additional three years is permitted.
(5) Ombudspersons and their deputies receive the necessary substantive support and recognition from GIU leadership to fulfill their responsibilities. To enhance the functionality of the ombudsman system, measures should be taken to alleviate the workload of current ombudspersons and deputies where possible.

§ 20 Duties of Ombudspersons

(1) Ombudspersons and their deputies perform their duties independently, as outlined in § 19, and are not subject to directives or informal case-specific influences from the university leadership or other university bodies. Ombudsman activities are conducted confidentially, ensuring strict confidentiality.
(2) All members and affiliates of GIU may consult the ombudspersons regarding matters of good scientific practice or suspected scientific misconduct. Alternatively, they may contact the nationwide "Ombudsman for Scientific Integrity in Germany."
(3) The university leadership ensures that the local ombudspersons and their deputies at GIU are known. The identities and contact details of the current ombudspersons are made available on the GIU intranet.
(4) Ombudspersons act as neutral and qualified points of contact for issues of good scientific practice and cases of suspected scientific misconduct. Where possible, they assist in solution-oriented conflict mediation.
(5) Ombudspersons and their deputies handle inquiries confidentially and, if necessary, refer cases of suspected scientific misconduct to the investigation commission at GIU, as outlined in Section III.

Part III: Procedures for Handling Scientific Misconduct

§ 21 General Principles for Handling Suspected Cases of Scientific Misconduct

(1) All entities at GIU responsible for investigating suspected scientific misconduct within their jurisdiction must take appropriate measures to protect both the person making the accusation (whistleblower) and the accused. The responsible entities acknowledge that conducting an investigation and potentially imposing sanctions constitute significant intrusions on the legal rights of the accused.
(2) Investigations into allegations of scientific misconduct must always adhere to principles of due process, fairness, and the presumption of innocence. Additionally, the investigations must be conducted confidentially. Inquiries are carried out impartially, and decisions are made without bias toward any individual involved.
(3) Whistleblowers must act in good faith. They must provide objective evidence suggesting that there may have been a breach of good scientific practice standards. If the whistleblower cannot independently verify the facts underlying the suspicion or if there are uncertainties about interpreting the guidelines for good scientific practice under Section I, they should seek clarification by consulting the individuals specified in § 20 (1) and (2).
(4) Neither the whistleblower nor the accused should face disadvantages in their scientific or professional development due to the whistleblowing process. For the accused, this applies until misconduct is proven and established. For individuals in early career stages, the investigation should not unduly delay their qualification processes. Writing theses and dissertations must not be adversely affected, nor should working conditions or potential contract extensions.
(5) The whistleblower is also protected if no misconduct is proven in the investigation. The only exception applies if the allegations were made knowingly false or in bad faith.

(6) All entities involved in the procedure must ensure the process is conducted as promptly as possible. They must take all necessary steps to complete each phase of the process within a reasonable timeframe.
(7) Anonymous allegations are reviewed if the whistleblower provides substantial and sufficiently specific facts that enable an investigation with reasonable effort.
(8) If the whistleblower's identity is known to the responsible entity, it must treat this information confidentially and not disclose it to third parties without the whistleblower's consent. Consent must be given in written form. Disclosure without consent is only permissible if legally required or if the accused cannot adequately defend themselves without knowing the whistleblower's identity. Before disclosing the whistleblower's identity, they must be informed and given the option to withdraw their report. If the report is withdrawn, disclosure will not occur unless legally required. However, the investigation may proceed if a balance of interests indicates it is necessary for maintaining scientific integrity in Germany or the legitimate interests of GIU.
(9) Confidentiality may be compromised if the whistleblower makes their suspicion public. The entity responsible for the investigation will decide on a case-by-case basis, exercising due discretion, how to address breaches of confidentiality by the whistleblower.

§ 22 Forms of Scientific Misconduct

(1) Scientific misconduct occurs when a person engaged in scientific activity at GIU, in a context relevant to science, deliberately or through gross negligence provides false information, improperly appropriates the scientific work of others, or impairs the research activities of others. This does not affect the specific instances outlined in paragraphs 5 to 8.
(2) False information includes:
   a) Fabricating scientific data or research results,
   b) Falsifying scientific data or research results, particularly by suppressing or deleting data or findings obtained during the research process without disclosure, or by distorting representations or illustrations,
   c) Presenting images incongruently with corresponding statements,
   d) Providing incorrect scientific information in funding applications or within reporting obligations,
   e) Claiming authorship or co-authorship of another person's work without their consent.
(3) Improper appropriation of the scientific work of others occurs in the following cases:
   a) Unattributed use of third-party content without proper citation (plagiarism),
   b) Unauthorized use of research approaches, findings, or scientific ideas (theft of ideas),
   c) Unauthorized sharing of scientific data, theories, or findings with third parties,
   d) Misrepresentation or unwarranted assumption of authorship or co-authorship in a scientific publication, especially where no genuine and identifiable contribution to the scientific content of the publication has been made,
   e) Distortion of scientific content,
   f) Unauthorized publication or disclosure of scientific work, knowledge, hypotheses, teachings, or research approaches to third parties before formal publication.
(4) Impairment of the research activities of others includes the following cases:

a) Sabotaging research activities (e.g., damaging, destroying, or manipulating experimental setups, equipment, documentation, hardware, software, chemicals, or other materials required for others' research),
b) Falsifying or unauthorized deletion of research data or documents,
c) Falsifying or unauthorized deletion of documentation for research data.

(5) Scientific misconduct by individuals engaged in scientific activity at GIU also arises—whether intentionally or through gross negligence—from:
a) Co-authorship of a publication containing false information or improperly appropriated third-party scientific contributions,
b) Neglect of supervisory duties when another person objectively commits scientific misconduct as defined in paragraphs 1 to 4, and such misconduct could have been prevented or significantly hindered by necessary and reasonable supervision.

(6) Scientific misconduct further arises from intentional involvement (as instigator or accomplice) in others' deliberate misconduct as defined in this statute.

(7) Scientific misconduct by reviewers or committee members of GIU occurs when, either intentionally or through gross negligence, they:
a) Use scientific data, theories, or findings, obtained in their capacity as reviewers or committee members, for their own scientific purposes without authorization,
b) Disclose data, theories, or findings to third parties in violation of procedural confidentiality,
c) Fail to disclose facts or circumstances that could raise concerns about bias to the responsible authority.

(8) Scientific misconduct also occurs if a reviewer or committee member of GIU, in their capacity, deliberately conceals facts they know indicate scientific misconduct by another individual, as defined in paragraphs 1 to 5, to gain an advantage for themselves or another person.

§ 23 Initiation of an Investigation

(1) Whistleblowers should report suspicions of misconduct to an ombudsperson or a deputy in accordance with § 20. Such reports should be submitted in written form. If made verbally, the receiving party must prepare a written record. If whistleblowers submit their suspicion directly to a member of the investigation commission, the member must forward the report to the appropriate ombudsperson.

(2) Concerns about the impartiality of ombudspersons in their role during proceedings under Section III are governed, deviating from § 19 paragraph 1 of this statute, by §§ 22 ff. of the Code of Criminal Procedure. The investigation commission, as outlined in § 24 of this statute, makes the decision.

(3) The responsible ombudsperson or their deputy conducts a confidential review to determine whether sufficiently concrete indications suggest that a person has demonstrably committed an act defined in § 22. If such an act is suspected to have been committed, the ombudsperson refers the case to the investigation commission for scientific misconduct.

§ 24 Preliminary Investigations

(1) As part of the preliminary investigation, the investigation commission or a member thereof promptly requests the accused person to submit a written statement regarding the allegation. In doing so, the commission provides the accused with the incriminating facts and evidence. A deadline is set for the statement, which is generally four weeks but may be extended. The statement must be submitted in writing or text form. The accused person is not obligated to incriminate themselves.

(2) During the preliminary investigation, the investigation commission or a member thereof may conduct investigations necessary to clarify the facts, insofar as such actions are permitted by higher-ranking laws. These actions may include requesting, procuring, and reviewing documents; securing other evidence; obtaining statements; or, if necessary, seeking external expert opinions. All individuals involved are to be requested to handle inquiries confidentially.

(3) The records must indicate which steps were taken to clarify the facts.

(4) Upon completing relevant investigations and evaluating all significant evidence, including the accused person's statement, the investigation commission or a member thereof promptly decides how to proceed. The decision depends on whether, based on the facts, it is more likely that scientific misconduct will be established by the investigation commission than that the proceedings will be dismissed (sufficient suspicion). If there is insufficient suspicion of actionable scientific misconduct, the investigation commission or a member thereof terminates the proceedings. If there is sufficient suspicion, the investigation commission or a member thereof transitions the preliminary review into a formal investigation, which is conducted by the investigation commission.

(5) If the proceedings are terminated, the decision is initially communicated in writing to the whistleblower. The main reasons for the decision must be stated. The whistleblower is granted the right to file a remonstrance against the decision within two weeks. The remonstrance may be directed to the investigation commission in accordance with § 25 and must include a substantiated justification. If the remonstrance is submitted within the deadline, the decision is re-examined.

(6) If the remonstrance period expires without action or if the remonstrance does not result in a different decision, the decision to terminate the proceedings is communicated in writing to the accused person, including the main reasons for the decision.

(7) If the proceedings are transitioned into a formal investigation, this decision is communicated in writing to both the whistleblower and the accused person. If the accused person has denied the allegation, the communication should briefly outline why the allegation could not be refuted.

§ 25 Investigation Commission

(1) For conducting formal investigations, an ad-hoc investigation commission is established at GIU, convened by the university administration on a case-by-case basis. The investigation commission consists of three members plus the chairperson. When selecting members, the diverse academic disciplines represented at the university should be taken into account. The chairperson of the commission is the most senior professor. The chairperson conducts the commission's proceedings and assumes authority over the meeting and its

administration. The commission elects a deputy chairperson from among its members. At least two members of the commission must be professors at GIU.

(2) Voting members of the commission, as well as their deputies, are appointed by the university administration following their election by the University Council of GIU. The term of office is four years, and re-election is possible. In specific cases, the investigation commission may include up to two non-voting advisory members from the field of the scientific subject under review.

(3) In cases of perceived bias or more than temporary incapacity of a commission member, their deputy assumes the role. Concerns about bias are governed by §§ 22 and following of the Code of Criminal Procedure. Such concerns may be raised by any voting member of the commission, university ombudspersons, or the accused. The commission decides on the matter, excluding the person against whom the objection is directed. Unavoidable procedural actions may still be undertaken.

(4) All voting members of the commission have equal voting rights, including the chairperson. Decisions are made by a simple majority; in the case of a tie, the chairperson has the deciding vote. The commission is only quorate if at least four individuals are present and able to vote.

(5) Members of the commission and their deputies act independently, particularly free from directives or informal case-specific influence by the university administration or other university bodies. Their work is conducted confidentially, maintaining strict confidentiality throughout.

(6) The investigation commission conducts its proceedings confidentially and behind closed doors.

(7) The current composition of the investigation commission can be obtained from the ethics committee.

§ 26 Procedure for the Formal Investigation

(1) The investigation commission schedules a timely meeting. Prior to the meeting, the accused person is given an opportunity to present their position on the allegations, either orally before the commission (hearing) or in writing. § 24 paragraph 1 sentence 6 applies accordingly. The whistleblower is also given another opportunity to provide a statement. Should the accused person choose not to make an additional statement, this decision cannot be used against them. In such cases, the decision is based on the existing documentation.

(2) The commission may hear additional individuals whose statements are deemed useful for the procedure at its discretion. The provisions of the Code of Criminal Procedure apply regarding possible rights to refuse testimony.

(3) Any individual appearing before the commission is entitled to bring a trusted person as support. The commission must be informed of this in advance.

(4) The investigation commission evaluates, based on the established principles of free evidence assessment, whether scientific misconduct is convincingly proven. Scientific misconduct can only be confirmed through a majority decision within the commission. The deliberations are confidential. The commission retains the right to terminate the procedure

if there is insufficient suspicion or if the misconduct is considered minor and insignificant. If the procedure is terminated, the whistleblower is not entitled to file a remonstrance.

(5) For any potential disclosure of the whistleblower's identity, § 21 paragraphs 8 and 9 apply accordingly.
(6) If there is suspicion of disciplinary or labor law violations, the procedure is suspended.
(7) The investigation commission promptly submits a final investigation report to the university administration, which includes the commission's sanction recommendations. The essential foundations of the commission's decision must also be communicated.
(8) The documentation from the formal investigation is retained by the university for a period of 10 years.

§ 27 Conclusion of the Proceedings

(1) The university administration decides, at its discretion, whether scientific misconduct by the accused person has been established and, if so, what sanctions and measures are to be imposed. If the revocation of an academic degree is considered as a measure, the appropriate authorities responsible for such actions are involved.
(2) If the accused person is a member of the university administration, they are excluded from consultations and decisions related to their case.
(3) The decision and its essential reasons are communicated in writing to both the whistleblower and the accused person after the meeting. The parties have recourse only to the legal remedies provided by law.
(4) The decision is also shared with affected scientific organizations and third parties who have a legitimate interest in the decision. The university administration decides, at its discretion, whether and how this information is communicated. It also decides whether and how to inform the public. Communications under this clause may include a rationale.
(5) If the revocation of an academic degree is considered, the appropriate authorities responsible for such actions are involved.

§ 28 Possible Sanctions and Measures

If the university administration deems scientific misconduct to be proven, it may impose the following sanctions and/or take measures, either alternatively or cumulatively, in proportion to the severity of the misconduct:

a) Written reprimand,
b) Request to the accused person to retract or correct incriminated publications or to refrain from publishing incriminated manuscripts,
c) Withdrawal of funding decisions or termination of funding agreements, provided the decision was made by the university or the contract was concluded by the university, potentially including a demand for repayment of funds,
d) Exclusion from acting as a reviewer or committee member of the university for up to five years,
e) For university employees: employment-related warnings, termination of employment, dissolution of the contract, or extraordinary dismissal,
f) For civil servants of the university: initiation of disciplinary proceedings under civil service law, including any interim measures provided therein,

g) Filing a criminal complaint with the police or public prosecutor's office,
h) Filing an administrative offense report with the competent authority,
i) Assertion of civil claims, including injunctive relief, particularly for damages, restitution, or removal/prevention of consequences,
j) Assertion of potential public-law claims, including injunctive relief,
k) Initiation of a procedure for the revocation of an academic degree or recommendation to initiate such a procedure.

§ 29 Transitional Provisions / Application Upon Departure from the University

(1) The provisions concerning scientific misconduct as outlined in § 22 apply only to acts committed after this statute has come into effect.
(2) The procedural regulations in this section apply only to reports submitted after the effective date of this statute. Pre-investigation, preliminary review, and investigation procedures already in progress at the time this statute comes into effect will be concluded under the previously applicable procedural rules.
(3) An act may still be pursued even if the accused person is no longer engaged in scientific activity at the university, provided they were engaged in such activity at the time the act was committed.

Part IV Entry into Force

§ 30 Entry into Force

This statute for ensuring good scientific practice and addressing scientific misconduct shall come into force on the day following its publication, after approval by the University Council.