ENGOT
European Network of Gynaecological Oncological Trial groups

BYLAWS

1. **Who we are**

ENGOT is a pan-European Network of Gynaecological Oncological Trial Groups supported by and part of the European Society of Gynaecological Oncology (ESGO).

ENGOT is a network of national and regional clinical trial units that coordinates and promotes clinical trials within Europe on patients with gynaecological cancer. This coordination is particularly relevant for academic clinical trials, translational research, research on rare diseases, and for clinical trials sponsored by the industry to perform multinational studies in Europe.

2. **Mission statement**

ENGOT is a platform that guarantees that the European spirit and culture is incorporated into the medical progress in gynaecological oncology, and that all European patients and countries can participate in an active way in clinical research and progress.

The ultimate goal is to bring the best treatment to gynecological cancer patients through the best science, and enabling every patient in every European country to access a clinical trial.

3. **Membership**

3.1. Members of ENGOT are European Study Groups focusing on gynaecologic oncology.

3.2. Each group should nominate 2 official representatives to ENGOT, 1 clinician and 1 administrative person

3.3. New groups need to apply with information on:

- Group structure
- List of institutions
- List of formerly performed trials and publications
- Data management capacities

3.4. Decision on new membership is done by voting of current members present at the meeting. Each group has one vote. The candidate needs to get a majority of 75% of the votes to be accepted as a member of ENGOT.

ENGOT Bylaws approved by ENGOT meeting on March 16, 2013
3.5. In principle several groups per country are allowed, but the new group should have an additional value (representing another region/other cancer types/other focus of interest, etc) compared with the already accepted ENGOT-group from that country.

3.6. In case of application of a group from a country with already existing national group, the existing national group has the right to comment on the appropriateness of accepting another group from the same country.

3.7. Representatives of groups should be member of ESGO.

4. Leadership

4.1. There is a dual chairpersonship consisting of one clinician (Clinical Chair) and one administrative person (Administrative Chair). The chairpersons are appointed for two years.

4.2. During the last year of the chairmanship a Vice-Chairman is appointed who takes over after the former chairman.

4.3. Starting the 2nd year of office, new Chairs are elected. The current Chairs nominate candidates, however additional candidates can be also nominated by groups under the condition that nomination is supported by a respective trial group and at least two ENGOT members (trial groups). Every group has one vote for Administrative Chair and one vote for Clinical Chair. Absolute majority of votes of clinicians present elect the Clinical Chair, and absolute majority of votes of administrative people present, elects the Administrative Chair. In case of tie, Chairs have 2 votes. A direct re-election is not allowed.

4.4. A Past-Chairperson remains Vice-Chairman for 1 year after his chairmanship stops.

5. Finances

5.1. ENGOT has a sub-account under ESGO account with authorization rights of both chairpersons.

5.2. The ENGOT member groups do not pay membership fee to ENGOT.

5.3. ENGOT is financed by contributions coming from ENGOT trials and of educational activities. Leading groups of ENGOT trials, negotiate a fee for ENGOT from the supporting body for setting up a study. The amount of contributions appointed to each trial is detailed in Minutes from ENGOT meetings and available from the Secretariat upon request.