## **Sample Informed Consent Form 1**

CONSENT FORM

(Insert Title of Study)

 I have been asked to participate in a research study (*Insert general statement about study, including if it is a degree requirement*). I was asked to be a possible participant because (*Explain how participant was identified*). A total of (*Insert number of test subjects*) people have been asked to participate in this study. The purpose of this study is (*Explain research question and* *purpose in lay language*).

 If I agree to be in this study, I will be asked to (*Explain tasks and procedures: Participants should be told about video or audio taping, if participation will be affected if participant does not want to be video or audio taped, and assignment to study groups where applicable)* This study will only take (*Insert length of time for participation, frequency of procedures, etc*.) The risks associated with this study are (*Risk must be explained, including the likelihood of the risk*). The benefits of participation are (*Insert benefit(s); if no benefits, state that fact here*.)

 I will receive (*Insert payment or reimbursement information, if no monetary compensation, state that fact here. If participants receive class points or some other token, include that information here and alternative task in case participant does not want to participate in study but wants to obtain class points. Explain when disbursement will occur and conditions of payment. For example, if monetary benefits will be prorated due to early withdrawal*.)This study is (*anonymous or confidential - and describe how this will be accomplished*). Therecords of this study will be kept private. No words linking me to the study will be included in any sort ofreport that might be published. Research records will be stored securely and only (*Insert names of individuals who will have access to this data*) will have access to the records. (*If tape recording or videotapes are made, explain who will transcribe the tapes, who will have access, if they will be used for education purposes, and when they will be erased*.) I have the right to get a summary of the results of this research if I would like to have them.

 I understand that my participation is strictly voluntary. My decision regarding my participation will not affect my current or future relations with Davenport University. If I decide to participate, I am free to refuse to answer any of the questions that may make me uncomfortable. I can withdraw at any time without my relations with the university, job, benefits, etc., being affected. I can contact (*Insert your name and contact* *information and advisors name and contact information*) with any questions about this study.

 I understand that this research study has been reviewed and Certified by Davenport University’s Institutional Review Board. For research-related problems or questions regarding participants' rights, I can contact the Institutional Board at IRB@davenport.edu.

 I have read and understand the explanation provided to me. I have had all my questions answered to my satisfaction, and I voluntarily agree to participate in this study. I have been given a copy of this consent form. By signing this document, I consent to participate in the study.

Name of Participant (printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Signature of Principal Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Information to identify and contact investigator (address, telephone, etc.)

*Add if seeking consent for a minor (under age 18) to participate*

If giving consent for a Minor Child to participate, print child’s name:

Relationship to Child (please identify the relationship)

Legal Guardian (appointed by)

*Note: All informed consent statements should be designed to meet the needs of each individual* *research project and / or sample group and are therefore subject to change as needed.*

Approval by parents does not sign away or negate the right of children to refuse to participate.

Each child’s assent form must contain the above elements, state that participation is voluntary, and permit the child to refuse to participate.