## CONSENT TO ACT AS A SUBJECT IN A RESEARCH STUDY

##

General instructions: This template is for research with adult participants. Please note that there are specific items that need to be removed or added based on the type of research (survey versus oral history). Replace bracketed text with information specific to your project. You may modify the sample text to fit your project. Participants should be given 2 copies of the Informed Consent document, one to complete and return to you and one to keep for their own records. Please remember to use lay language (6th to 8th grade reading level throughout the document).

## Informed Consent Document for *[Title of Project]*

Researchers: *[Names of PI and any Co-Is; Contact information of PI including email and phone number should be provided]*

Affiliation: Cecil College *[and/or other affiliation if appropriate]*

You are being asked to participate in a research study of *[insert general statement about the purpose of the project]* at Cecil College. We are asking you to take part because *[insert reasoning as to why subjects were chosen].* Please read this form and ask any questions you may have before agreeing to participate in the study.

What the study is about:

The purpose of the research project is to *[insert explanation of the research question and purpose]*. Approximately *[fill in approximate number of subjects needed]* people from *[insert list of all locations]* will be participating in this project.

What we will ask you to do:

During the course of this research project, you will be asked to *[detail what the subject will be asked to do as a part of the project e.g., complete a survey, participate in an interview*. *If, the project includes a survey describe what kinds of questions participants will be asked. Describe what else they will be asked to do e.g. return the survey in the provided envelope. Include the duration of the study, specifically noting the duration of the participants involvement. If this is an oral history project indicate the length of time in hours/minutes that the participation will be interviewed.]*

Risks and benefits of being in the study:

*[If there are potential benefits to the subject, e.g. extra credit, describe them and delete the following sentence].* There may be no direct benefits for you; however, information from this research project may benefit other people now or in the future by *[explain the potential benefits to others]*.

By taking part in this study, you may experience the following risks *[describe any potential risks, including changes in emotional state, or indicate that the researchers foresee no potential risks to participation.]* There may also be risks involved in taking part in this study that are not known to researchers at this time.

*If this is an intervention based study that has alternative courses of action include the following statement.* At the current time alternative procedures or courses of treatment, including *[insert options here]*, may be proposed. *If there are no alternatives include the statement.* At the current time there are no alternative procedures or courses of treatment. *[remove this paragraph if this is not an intervention based study].*

Compensation:

*[Describe any costs that will be incurred by the subject or any compensation that will be given to the subject. Please note that extra credit is considered compensation. If no compensation is offered, include the statement “No monetary or other compensation is offered for your participation in the study.”]*

Your answers will be confidential:

Your answers will be confidential. The records of the study will be kept private. In any sort of report that is made public we will not include any information that will make it possible to identify you. Paper research records will be kept in a locked file on campus; electronic data will be stored on a password-protected secure server.

If you are conducting an oral history project, please use the following two (2) paragraphs [*if not delete this section*].

The interview will be recorded and you may be identified by your name, subject to your consent. You also may be identified by name in any transcript (whether verbatim or edited) of the interview, subject to your consent. Please indicated your choices below:

\_\_\_\_\_ I may be identified by name in any transcript or reference to any information contained in this interview.

\_\_\_\_\_ I wish to remain anonymous in any transcript or reference to any information contained in this interview. I recognize that the interviewer and the transcriber will have knowledge of my identity, but they will maintain the confidentiality of that information.

Recordings and transcripts of the interview will be used for this project as described above. You have the right to review the recording and/or transcript of the interview and impose any restrictions as to use of portions of the recording. Those portions will be edited out of the final copy of the transcript. Recordings

will be stored in a locked file for [*indicate how long records will be kept*]. Personally identifying information will not be shared with third parties.

If a professor is awarding extra credit, the [*insert primary investigator’s name*] will be providing that professor with a list of the students in the class who participated *[delete this sentence if it is not accurate].* In addition to the researchers*,* the Cecil College Institutional Review Board, or federal agencies with appropriate regulatory oversight, may review your records and they may be released in response to an order from a court of law.

Taking part is voluntary:

Taking part in this study is completely voluntary. You may skip any questions you do not want to answer. If you decide to not take part, end your involvement in the study or skip some of the questions, it will not affect your current or future relationship with Cecil College or your professor. If you decide to take part, you can withdraw at any time. If this is an oral history project insert this statement [*If you choose to withdraw at any time, recordings made of the interview will be either given to you or destroyed. No transcript will be made of the interview*].

If you have any questions:

If you have any questions now or in the future, you may contact *[insert name of principal investigator]* at *[insert telephone number and email address]*. If you have questions or concerns about rights and treatment of research subjects you may contact the Chair of the Cecil College Institutional Review Board, *[name of current IRB Chair]*, at irb@cecil.edu.

Consent to Participate in *[title of study]:*

By signing below, I grant my consent to participate in the research project *[title of project]* being conducted by *[insert names of researchers].* The procedures have been explained to me and my questions have been answered to my satisfaction. I understand that I may withdraw from this research project at any time without penalty or loss of benefits. A copy of this form was provided to me. I understand that this study will be [if applicable] recorded and consent to the use of the information and images created during this study as described above.

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Signature of Subject/ Legally Authorized Representative Date

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Printed Name of Subject/ Authorized Representative

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Signature of Witness (When applicable)\*\* Date\*\*

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Printed Name of Witness\*\*

\*\* Use when subject has had the consent form read to them (i.e., illiterate, legally blind, translated into foreign language).\*\*

If you are under the age of 16 your parent or legal guardian must sign the consent form in order for you to participate in the research.