

*The sample consent form should be used as a guide. Please go to the Keystone College IRB website to read more about the consent and assent requirements. Student Researchers should consult with their Advisor or Instructor.*

**INFORMED CONSENT FORM**

You are invited to participate in a research study being conducted through Keystone College*.* We ask that you read this form and ask any questions you may have before you decide whether or not you want to participate in the study. The College requires that you give your signed agreement if you choose to participate.

**1) Researchers Affiliations:**

This study is being conducted by… *[Insert Researcher’s name and title]* under the supervision of

*(Insert name of Instructor or Advisor, and that person’s Department or Program.)*

**2) Purpose of the Study:**

*[Insert Purpose of Study in everyday terms, including expected duration in minutes]*

**3) Procedures:**

Participants will be asked to do the following … *[Explain tasks]*

**4) Questionnaires or Surveys Used:**

*[If you use any questionnaires or survey instruments, including demographic questionnaires, name and describe them, with illustrative sample questions. Otherwise, write “Not Applicable”]*

**5) Voluntary Participation:**

Participation in this study is completely voluntary. There is no penalty for not participating. Participants may discontinue their participation and withdraw from the study at any time without penalty.

**6) Anonymity:**

Participants’ anonymity will be preserved. No individually identifying information will be asked during the study. Consent forms (which have names and signatures) and the data collected will not be linked.

**7) Confidentiality:**

All information will be handled in a confidential manner to the extent provided by law, so that no one will be able to identify participants when the results are recorded. The records of this study will be kept private. In any report or presentation, we will not include anyinformation that will make it possible to identify a research study participant.

**8) Access to Records:**

Identifying consent forms will be stored in a locked cabinet at Keystone College. Only the research supervisor will have access to this information, not the individual researchers. Anonymous data will be kept securely stored by the researchers. (*Specifics about maintaining security of artifacts such as audio or video recordings should be included.)*

**9) Risks and/or Discomforts of Participation in the Study:**

The study has the following risks… *[Risk must be explained, including the likelihood of the risk. If there are no risks, then state, ”There is only minimal risk, no more than daily life.” If any discomforts to the subjects are anticipated, mention these and expected intensity and duration]*

**10) Benefits of Participating in the Study:**

The benefits to participation are… *[If no benefit, state “There is no direct benefit to the subject to participating in this study.” Compensation, including course credit, is not considered a benefit.]*

**11) Compensation:**

*[Explain compensation, if any. If extra credit is offered, please elaborate. Also, if extra credit is offered, an alternative project must be identified, which requires a comparable amount of effort and extra credit. The alternative extra credit project must be offered for students who do not want to participate in the study.]*

**Contacts and Questions:**

The researcher conducting this study is: [*List researcher’s name, title and contact information (department address, phone and email). If researcher is a student, list the student’s name, email addresses and department’s address and phone number, and list the advisor’s name and contact information.]*

You may ask any questions you have now. If you have questions later regarding the research study, you may contactthe researcherlisted above. If you have any questions or concerns about the rights of research participants, please contact the IRB Committee at Keystone College.

**Statement of Consent:**

I have read the information described above and have received a copy of this information. I have asked questions I had regarding the research study and have received answers to my satisfaction. I am 18 years of age or older and voluntarily consentto participate in this study.

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Printed Name Signature of Participant Date

***Thank you for your participation.***