**EDGEWOOD UNIVERSITY**

**INFORMED CONSENT FORM**

**[NAME OF THE STUDY]**

**Purpose of the Study**

*[Provide 2-3 sentences about the general purpose of your study. Be sure to refrain from using jargon from your field of study that may not be understood by the average participant.]*

**Research Procedures**

*[Provide in detail* ***what exactly participants will be asked to do*** *as part of their participation. Include the topics or subject matter of questions that they will be asked, the time it will take to participate, and whether it is online, in person, etc. If any kind of recording will take place, please explicitly describe it.*

***NOTE: Write this section and the following sections to the participants, e.g., “You will be asked too…”]***

**Risks of being in the study**

*[Detail any possible risks to participants. Even if risks are considered minimal, participants should be aware of them. It is not enough to say that risk is minimal without offering more specific detail. Risks can include feeling uncomfortable or distressed about being asked questions about sensitive issues. Include how the risks will be mitigated (e.g., You may skip any question, or discontinue participation at any time).]*

**Benefits of being in the study**

*[Discuss any possible benefits to participants. It is acceptable to outline that “there are no direct benefits to you” (no rewards, compensation, etc.). It would also be acceptable to then outline any possible broader benefits to the research such as learning more about this field of study. NOTE: Incentives like drawing for gift cards etc. are not considered benefits and should be outlined in Research Procedures]*

**Confidentiality**

*[Outline how the data that is collected will be kept private. Information that should be provided: how the data will be kept secure (password protected computer, locked file cabinet, etc.), who will have access to the data, and how their identity will be protected in published reports. If any recordings (video, audio) are made, how that data will also be kept secure. Because this data contains more identifying information, this is especially important to note how it will be kept confidential and who will have access to the recordings and how they will be used. Be sure to distinguish between anonymous and non-anonymous data. Anonymous data means that not even the researcher is aware of who participated (e.g., online surveys with no identifying information collected).]*

**Voluntary Nature of Participation**

*[Statements ensuring the voluntary nature of this project are required here. Participants should be assured that their decision whether or not to participate will not affect their current or future relations with the academic institution, place of employment, etc. Participants also must be informed that if they decide to participate, that they are free to withdraw at any time without affecting those relationships.]*

**Contact Information**

*[Please provide contact information for all principal investigators. If you are a graduate student or an undergraduate student, please also provide your advisor’s contact information. Finally, please add the following to this section re: contacting IRB.]*

If you have any questions and concerns and would like to talk with someone other than the researchers, please feel free to contact the Institutional Review Board via lambert@edgewood.edu. A copy of this form is available for you at your request.

**Statement of Consent:**

I have read the above information. I have asked any questions I have and have received adequate answers. I consent to participate in the study.

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

Signature of Investigator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_