**Consent to Participate in Research Study [Template]**

**[Replace text in brackets]**

**Title of Study:** [Insert name of study here]

**Investigators:** [List names and affiliation]

**IRB Study Number:** [Include number assigned to your approved project]

**KEY INFORMATION:**

[Insert one paragraph that includes the following components:

1. A statement that the project is research and participation is voluntary

2. A summary of the research including purpose, duration, and list of procedures

3. A list of reasonable, foreseeable risks or discomforts

4. A list of reasonable, expected benefits

5. Alternative procedures or courses of treatment (if applicable)]

**Description of the Study Procedures**

* If you agree to be in this study, you will be asked to do the following things: [Explain in detail the procedures and tasks; identify any procedures that are experimental; describe length of time for participation, frequency, and duration of procedures; etc.]
* [If applicable, explain any alternative procedures/activities available to the subject.]

**Risks/Discomforts of Being in this Study**

* The study has the following risks. First, [explain first risk, including the likelihood of the risk]. Second, [if needed, explain second risk, including the likelihood of the risk]. Third, …etc.
* [If there are no foreseeable risks, state as such.] There are no reasonable foreseeable (or expected) risks. There may be unknown risks.

**Benefits of Being in this Study**

* The benefits of participation are [explain benefits of participation that will be gained by the participants and/or others. If a benefit is not likely to occur do not include.]
* [Include language that the study may be of no benefit to the participant.]

**Confidentiality** [Choose the appropriate statement(s)]

* **[Information is identifiable when provided to the investigator, but identifiers are discarded:** The subject's information includes identifiers (names, student ID numbers, social security numbers, etc.) when initially provided to the investigator, but identifiers will be discarded as the information is recorded, making the subject's information anonymous in the record. The investigator cannot subsequently link subject information with subject identity. Your identity will not be revealed and remain confidential in any report.
* **Information is identifiable when provided to the investigator, but the investigator masks the identifiers:** The subject's information includes identifiers when initially provided to the investigator, but the identifiers are masked through coding, the assignment of project-specific identifiers, or other means. Only the investigator and others directly involved in data collection or analysis can subsequently link subject information with subject identity. Your identity will not be revealed and remain confidential in any report.
* **Information is identifiable when provided to the investigator, and identifiers remain linked to the information:** The subject's information includes identifiers and anyone with access to the raw data will be able to link subject information with subject identity. Your identity will not be revealed and remain confidential in any report.
* **Information is provided to the investigator anonymously:** The subject's information will be anonymous when it is provided to the investigator, so the investigator cannot link subject information with subject identity. Your identity will not be revealed and remain confidential in any report.

**Payments or Compensation**

You will receive the following payment, reimbursement, or other compensation for participating in this study: [Explain amount of payment, reimbursement, or other compensation information (e.g., class points, tokens, donations, etc.), as well as when it will occur and in what cases it will not occur, if any. If there will be no payment, state this.]

**Right to Refuse or Withdraw**

The decision to participate in this study is entirely up to you.You may refuse to take part in the study *at any time* without affecting your relationship with the investigators of this study, Merrimack College, or any study partners. Your decision will not result in any loss or benefits to which you are otherwise entitled. Youhave the right not to answer any question, as well as to withdraw completely from the interview, survey, or study at any point during the process; additionally, you have the right to request that the researchers not use any of your study materials.

**Right to Ask Questions and Report Concerns**

You have the right to ask questions about this research study and to have those questions answered by me before, during, or after the research. If you have any further questions about the study at any time, feel free to contact me, [name] at [email] or by telephone at [phone number]. [If the researcher is a student, add: You may also contact the Merrimack College faculty supervisor of this research (name, e-mail, telephone number)].If you like, a summary of the results of the study will be sent to you.If you have any other concerns about your rights as a research participant that have not been answered by the investigators, you may contact the Chair of the Merrimack College Institutional Review Board (IRB) at 978-837-5280 or by email at irb@merrimack.edu. If you have any problems or concerns that occur as a result of your participation, you can report them to the Chair of the IRB.

**Informed Consent**

Your signature below indicates that you have decided to volunteer as a research participant for this study, and that you have read and understood the information provided above. You will be given a signed and dated copy of this form to keep, along with any other printed materials deemed necessary by the study investigators.

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Subject's Name (print)

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Subject's Signature Date

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Person Obtaining Consent's Name (print)

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Person Obtaining Consent's Signature Date