

## **Creating an Informed Consent Form**

Creating an Informed Consent Form for your study is not difficult. The primary purpose of this form is to inform your potential participants what you plan to ask them to do during your study so that they can decide if they want to participate.

### **Your form must explain the following areas:**

- Time required for participation
- The tasks each participant will be expected to accomplish
- Accessibility of communication
- Potential risks
- Compensation and other benefits
- Confidentiality
- Voluntary participation and freedom to withdraw
- Dissemination of results
- Contact information for the PI and the IRB

### **Note on Electronic Informed Consent Forms:**

Electronic versions of the Informed Consent Form are allowed for most research studies. If you plan to utilize an electronic form, then you must:

1. Provide documentation on the security of the electronic transmission of the form (e.g., the webpage security).
2. Ensure that the full form can be easily printed by the participant so that they have a record of their participation and the IRB contact information.

The following page shows a skeleton for an Informed Consent Form. You cannot simply print the form and give it to your participants. **You must make it specific to your study.** The balloons on the left will assist you in preparing your document.

Please contact us if you have any questions or need help creating your Informed Consent Form.

*Rev: 10/2015*

## INFORMED CONSENT FORM

Project Title:

Principal Investigator:

Address:

Phone:

E-mail:

Faculty Sponsor:

Department:

### Additional Help

**Comment [A1]:** Type your status here, such as "undergraduate student"

I am an [ ] at Gallaudet University. I am conducting research on [ ]. I would like you to consider participating in this study. It is hoped

**Comment [A2]:** Type the topic of your study here, such as "empathy"

that this study can be used to [ ] .

**Comment [A3]:** Type the benefits of your study here, such as "increase our understanding of empathy"

### This Study:

**Comment [A4]:** Type what you will ask each participant to do, such as "fill out a 100 item survey"

1. You will be asked to [ ]

**Comment [A5]:** Type about how much time participation will take, such as "1 hour"

2. It is anticipated that your participation will take approximately [ ] .

**Comment [A6]:** Type the participant reimbursement here, such as "\$12 per hour"

3. You will be paid \$ [ ] /hour for your participation.

**Comment [A7]:** Explain how you will accommodate your participants language preference

### Language:

Example: I will accommodate your preference for language and communication style. Please let me know about any particular communication requirements that you require.

**Comment [A8]:** Explain the risks for participating in your study

### Risks:

Example: There is no more than minimal risk to individuals who participate in this research study.

**Comment [A9]:** Explain the benefits for participating in your study

### Benefits:

Example: Your participation in this study will create a valuable contribution to the literature by extending the work of previous researchers.

**Comment [A10]:** Explain how confidentiality will be maintained during this study

### Confidentiality:

Example: Data will be kept completely confidential, that is, no one will know anything about your name or any other identifying information as a result of your participation.

**Comment [A11]:** All Informed Consent Forms must include this paragraph

**Voluntary Participation:**

Your participation in this study is voluntary. If you decide not to participate in the study, your relationship with Gallaudet University will not change in any way. You may withdraw from the study at any time before or during data collection, for any reason and without penalty.

**Comment [A12]:** Explain if individual results will or will not be given to each participant and why

**Results:**

**Example:** You will be given your individual test results obtained during this study at the end of participation.

**Comment [A13]:** All Informed Consent Forms must include this paragraph

**Contacting the Researcher or the IRB:**

**Comment [A14]:** Type your name

Contact the researcher, \_\_\_\_\_, if you have questions about any risk to you because of participation in this study. Use the phone number or e-mail account at the top of this consent form. You may also contact the Chairperson of the Gallaudet University Institutional Review Board for the Protection of Human Subjects (IRB) at irb@gallaudet.edu.

**Comment [A15]:** All Informed Consent Forms must include this paragraph

**Intent to Participate:**

If you agree to participate after reading this far, then read the following, print and sign your name below, and enter the date.

**Comment [A16]:** Type your name

I have read the Informed Consent Form and agree to participate in the study conducted by \_\_\_\_\_. I understand that I can withdraw from this

**Comment [A17]:** Type either "will" or "will not" depending on if you will pay your participant.

\_\_\_\_\_ study at any time without penalty or prejudice. I understand that I receive payment or reimbursement for my participation.

Your Name \_\_\_\_\_

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