

Covenant College – Consent to be part of a research study

Key information:

[STUDY TITLE]

[STUDENT PI and FACULTY PI]

You are being asked to take part in a research study. The purpose of this study is to [describe purpose]. If you choose to participate, you will be asked to [do what, when, where, how, and for how long]. There are no risks in this study other than those encountered in day-to-day life. The study is not designed to benefit you directly. Taking part in this research is voluntary. You can choose not to participate or to stop at any time. Please read this form carefully and ask any questions before agreeing to take part in the study.

Purpose of the study: [briefly describe the scientific reason for doing the research, using non-technical language and at a reading level appropriate for your target population]. We expect that [how many, max] people will take part in this study. You are invited to participate because you are [why, such as “a Covenant College student”] and are at least 18 years old. [If your study includes participants under 18, you must have parental consent for participation or request a Waiver of Consent language.]

What we will ask you to do: If you decide to take part, you will [describe specifically what participants will do, such as fill out surveys, respond to computer-based tasks, watch videos, etc; if deception or concealment is being used, alert participants accordingly.]. Participating in the study should not require more than [how long, over how many different days, etc].

Alternatives to participation: [If your project involves an intervention for a condition or disease, you must describe alternatives to participation; otherwise, delete this paragraph.]

Risks and benefits: There are no risks in this study other than those encountered in day-to-day life. There is no cost to you for participating. Some questions may be upsetting. You can skip any question or test that you don’t want to answer. [Delete this if there is minimal risk that participants will experience discomfort or emotional distress, or edit accordingly.] This study is not designed to benefit you. Your information will help us to learn more about [describe the scholarly or societal benefit of the research].

Compensation: You will not be compensated for your participation. [Edit if compensation, such as extra credit, money, candy, etc. is being used as compensation. Note that compensation is not a benefit.]

Your answers will be confidential. The records of this study will be kept confidential to the extent allowed by law. In any sort of report we make public we will not include any information that will make it possible to identify you. Research records will be kept secured on password-protected and firewalled computers. Only the following people will have access to the research records: the research team, the Covenant College Institutional Review Board, the Office for Human Research Protection (OHRP). We are not recording your name or any other identifying information in this study. Any information that could be used to identify you will be locked in a filing cabinet in a locked laboratory separated from your

actual responses. Your responses will be grouped with data from other volunteers for subsequent report. Note that the use of email for communication introduces risk of hacking that would disclose your answers. Note that you will be tested in a group with other volunteers who will be encouraged to keep all answers confidential; however, we cannot control what people do or say away from the study. [Edit / delete statements as appropriate.]

Future research: Your data may be shared with other researchers once any of your identifying information is removed. You won't be notified if we share your anonymous responses with other researchers.

Taking part in this study is completely voluntary. You are free to leave the study at any time. If you leave the study before it is finished, there will be no penalty to you. You may skip any questions that you do not want to answer. Because this is a multi-part study, you may also be removed from the study by the research team if you cannot attend every session. [Edit as appropriate.]

Funding: [Describe funding sources]

Conflict of interest: [Describe any Col]

If you have questions: The researcher(s) conducting this study is/are [student researchers' names], under the supervision of [faculty principal investigator] at Covenant College. If you have questions or concerns at any time, you may contact research team using the contact information below. You may also contact the Covenant College Institutional Review Board at any time at irb@covenant.edu.

[add contact information for research team]

If you agree be in this study, then [how will participant consent, e.g., "sign below" and add lines for signature, or "click the link below" and add a URL for the study, or "tell the researcher that you are ready to begin" or similar?]. You will receive a copy of this consent form for your records OR You may print a copy of this consent form for your records. [Edit as appropriate. Delete the lines below if you are requesting a waiver of documentation of consent.]

_____	_____	_____
Printed name of volunteer	Signature of volunteer	Date

_____	_____	_____
Printed name of researcher	Signature of researcher	Date