

Informed Consent Form 2020-2021

Instructions for Researchers (Please read first)

1. All text in regular print is to be included in your consent form.
2. All instructions for this form are in blue ink/bold. Follow these instructions to complete your consent form. Then **delete them** from your form. **Also delete this first page of instructions.**
3. If your study *does not* require the inclusion of the information, delete the instructions
4. If your study **does** require the inclusion of the information, put in the information and then delete the instructions (in blue ink/bold).

INFORMED CONSENT FORM

To: **Put a line for the participant's name or name of parent or guardian**

You are being asked to participate in a research project entitled: **Insert title of study**

****If the study involves participants from special populations that require approval of a parent or guardian, substitute the following sentence for the one above:**

You are being asked to permit _____ to participate in a research project entitled: **Insert title of study.**

Describe for the participant:

- 1. The purpose of the research.**
- 2. The nature and duration of participant's participation.**
- 3. The procedures to be followed.**

This research is being conducted by : **Insert name(s) of principal investigator(s) and student(s), if this is a student project, and identify their roles so the participants will understand who they are.**

Describe for the participant:

- 1. The purpose of the research.**
- 4. The nature and duration of participant's participation.**
- 5. The procedures to be followed.**

State that the study is anonymous or explain how confidentiality will be maintained.

Identify the benefits of participation.

Identify the potential risks of participation.

Identify alternative procedures, if any, that would be beneficial to the participants.

****Include this part if you are making audio or video recordings. Describe what you will be recording and how (either by audio or video recording). State that the recordings will be used by the researcher for data analysis only, or state that they will be used for data analysis as well as made public (for example: in oral or written presentations of the findings of the study or in classroom demonstrations). Identify the places the recordings will be played.**

I give permission to the researcher to play the audio or video recording of me **(or the person for whom I am consenting)** in the places described above. Put your initials here to indicate your permission. _____

****Include the following statement only if your study is classified as one involving risk (see the Guidelines):**

In the event that I am harmed **(or the person for whom I am consenting is harmed)** by participation in this study, I understand that compensation and/or medical treatment is not available from Russell Sage College. However, compensation and/or medical costs might be recovered by legal action.

Participation is voluntary, I understand that I may at any time during the course of this study revoke my consent and **withdraw or withdraw** __[insert name of the person for whom the person is consenting, if relevant]_____ from the study without any penalty.

I have been given an opportunity to read and keep a copy of this Agreement and to ask questions concerning the study. Any such questions have been answered to my full and complete satisfaction.

I, _____, having full capacity to consent, do hereby volunteer to participate in this research study

Signed: _____ Date: _____
 Research participant

****If the study involves participants from special populations which require the approval of a parent or legal guardian, substitute the following statement for the one above:**

I, _____, having full capacity to consent, do hereby give permission to _____ to participate in this research study.

Signed: _____ Date: _____
Parent or Legal Guardian

This research has received the approval of Russell Sage College Institutional Review Board, which functions to insure the protection of the rights of human participants. If you, as a participant, have any complaints about this study, please contact:

Dr. Theresa Hand
Provost
Russell Sage College
65 1st Street
Troy, New York 12180
518-244-2069
handt@sage.edu