

SAMPLE
Consent Form to Participate in Research

Introduction- I understand that I am being invited to participate in a research study. My participation is voluntary and I have the option to withdraw at any time without penalty. _____ (name of person or department) is sponsoring this study at Point Loma Nazarene University. The purpose of this research is to understand- _____.

Procedures- I understand that the proposed length of my participation in this study consists of (one session –). The entire session is estimated to take minutes. I will be asked to respond to questions pertaining to _____.

Risks- Although no significant / known risks in relation to this study, I understand that questions asking for _____ may be uncomfortable.

Benefits- (e.g., **Can discuss -knowledge as a benefit**).

Confidentiality- I understand that my participation is anonymous and voluntary and that I may refuse or withdraw from the study at any time. I understand that no personally identifying information will be associated with my responses.

If on-line ... (By continuing to complete the on-line survey, I am acknowledging that I am aware of the potential risks and benefits of participating and that completion and submittal of the survey will be considered providing my voluntary consent to participate.) By completing the survey, I am certifying that I am 18 years of age or older. I understand that I have a right to a copy of this consent form.

Debriefing- I understand that I have the right to have all questions about the study answered in sufficient detail for me to clearly understand the level of my participation as well as the significance of the research. I understand that at the completion of this study, I will have an opportunity to ask and have answered all questions pertaining to my involvement in this study.

Receipt of informed consent- *By completing and submitting the survey, I acknowledge having received the information regarding consent, and that I may call the investigators involved in the study, or supervising professor, Dr. XXXX, in order to discuss confidentially any questions about participation in the study. Also, should I have any concerns about the nature of this study, I can also contact the Chair of PLNU's IRB. Patricia Leslie@ PointLoma.edu.*