# **Instructions for Investigators**

Use this type of CHILD ASSENT FORM for research projects that involve:

* Research participants who are MINORS (age 17 and under). Since minors typically may not provide informed consent for themselves, a parent/guardian needs to provide consent for the minor to participate. The researcher must get both the parental/guardian consent/permission (which is a separate document, not listed in this file), and the assent of the minor for the minor to participate.
* Interview, Survey or Observation, and Intervention. Intervention includes both physical procedures by which data are gathered and manipulations of the participant or the participant's environment that are performed for research purposes.
* Always have two copies of the informed consent for each potential participant. One signed copy is kept by the PI or research team, and the other is to be given to the enrolled participant after written consent is given.
* Revise the following template according to your research design while keeping the section headers, first person perspective, and 6th grade writing level.
* Please remove the *red notes* before finalizing your assent form.



**Assent to Participate in a Research Project - 14 - 17 years of age**

*(Insert PI name)*, Principal Investigator

*Project Title: (insert title here)*

My name is (*insert name*) and I am inviting you to participate in my research study. I am a (*faculty or staff member, graduate student, etc*.) at Franklin University in the (*department*). *(If you are a student, indicate that findings will contribute to your thesis or dissertation.)* The purpose of my research project is to learn about (*briefly describe topic*).

**Activities and Time Commitment**: If you agree to be in this study, I will interview/survey you. The interview/survey will occur *(location)*. The interview/survey will last for about *(time commitment, e.g., minutes or hours)*. (*Insert*: No one else *or [name]*) will be present in the room during the interview/survey. If you choose to participate, you will be one of a total of *(number of participants and grade/age, as appropriate)* that I will interview/survey separately. One example of the kind of question I will ask is, “*(provide sample question)*?” If you would like to see a copy of all of the questions that I will ask, please contact me via the phone number or email address listed near the end of this assent form.

*(Insert as applicable)* I will record the interview using an audio-recorder. I am recording the interview so I can later type a written record of what we talked about during the interview.

**Benefits and Risks**: There may be no direct benefits to you for participating in this research project. The results of this project might help me *(list others, e.g., researchers or teachers)* learn more about *(topic or specific goal)*. I believe there is little or no risk to you for participating in this project. There is a possibility you may become uncomfortable or stressed by answering an interview/survey question or questions. If that happens, we will skip the question, take a break, or stop the interview/survey. You may also withdraw from the project altogether.

**Confidentiality and Privacy**: I will keep all study data secure *(describe procedures to safeguard data)*. (*Describe who will have access to identifiable records, i.e.,* “Only my Franklin University advisor and I will have access to the information.) Other agencies that have legal permission have the right to review research records. The Franklin University Institutional Review Board has the right to review research records for this study.

(*Insert this language as appropriate*)After I write down the interviews, I will destroy the audio-recordings. When I report the results of my research project in my typed paper, I will not use your name or any other personal information that would identify you. Instead, I will use a pseudonym (fake name) for you. If you would like a copy of my final report, please contact me at the number listed near the end of this assent form.

**Voluntary Participation**: Participation in this research project is voluntary. You can choose freely to participate or not to participate. At any point during this project, you can withdraw your permission and stop participating without any loss of benefits. Your participation or non-participation in my research project does not impact *(insert context as appropriate, e.g., your grades, your relationship with me, etc.)*.

**Questions**: If you have any questions about this project, contact me, *(insert name)*, by phone *(xxx) xxx-xxxx* or e-mail (*name@franklin.edu*).

*(Insert if you are a student)* You can also call my advisor at Franklin University, (*insert name*), at (614) 947-xxxx or by email at *advisor@franklin.edu*.

You may contact the Franklin University IRB Office at (614) 947-6037 or irb@franklin.edu to obtain information or to discuss problems, concerns, and questions.

Please keep the section above for your records.

If you assent to be a participant in this project, please sign the signature section below and return it to (*insert name*).

------------------------------------------------------------------------------------------------------------

Tear or cut here

------------------------------------------------------------------------------------------------------------

**Signature(s) for Assent**:

I assent to join the research project entitled (*insert name*). I understand that I may change my mind about being in the study at any time.

**Name of Participant**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Participant's Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_