

Consent Form Directions

- Read the consent form and adapt the text to fit your research.
 - **Orange text** needs to be adapted.
 - **Green text** choose the statement that applies to your research and delete the other statement.
 - **Blue text** choose the appropriate option. Delete the other option not being used.
 - **Red text** delete from consent form.
- Format the document to un-bold the text and change the font color to black.
- If your research is exempt, then refer to the information sheet. Exempt research does **not** require a consent form or a signature line.

ADULT CONSENT FORM TEMPLATE

What is this research studying?

The study is called, “**{Title of your study.}**” This study will help us learn how **{briefly describe the purpose of your study.}**

What would I do if I participate?

In this study, you will be asked to **{describe what their participation entails in this study.}**

Can I quit if I become uncomfortable?

Yes, absolutely. **{TTU PI's Name}** and Texas Tech University's Institutional Review Board have reviewed this research project and think you can participate comfortably. However, you can skip parts of the research you are not comfortable with and stop at any time. You will keep all the benefits of participating even if you stop. Participating is your choice.

How long will participation take?

We are asking for **{amount of time}** of your time.

How are you protecting privacy?

Your name will not be linked to any material in reports, publications or presentations. No one other than the researchers associated with this project will have access to the raw data. All related documentation will be stored in the researcher's locked office **{and/or}** on a password protected computer.

What will happen to my data?

Identifiers might be removed from the **{CHOOSE ONE OPTION: identifiable private information OR identifiable biospecimens}** and after such removal the **{CHOOSE ONE OPTION: information or biospecimens}** could be used for future research studies or distributed to another investigator for future research studies without additional informed consent from you or your legally authorized representative.

or

Your **{CHOOSE ONE OPTION: information OR biospecimens}** collected as part of the research, even if identifiers are removed, will not be used or distributed for future research studies.

How will I benefit from participating?

{CHOOSE ONE OPTION: There are no direct benefits OR You will receive (Enter benefit)} for your participation. We appreciate your time and effort with this research study.

I have some questions about this study. Who can I ask?

- The study is being run by **{TTU PI's Name and Co-Investigator's Name}** from the Department **Department's Name** at Texas Tech University. If you have questions, you can call **{him/her}** at **{XXX-XXX-XXXX}**.
- Texas Tech University also has a Board that protects the rights of people who participate in research. You can contact them at 806-742-2064 or hrpp@ttu.edu.

Signature

Date

Printed Name