

Genetics Informed Consent Form

Please participate in a research project.

What is this project studying?

The study will help us learn about life, the universe, and everything [brief description of the purpose of the work in just a few lines of text].

What would I do if I participate?

- If you decide to be in this project, you will answer some questions about you and your health. You will also answer some questions about your family's health.
- To learn about your genetics, you will have [amount] of [blood/something else] taken [once/number of times/number of days]. The blood [modify for a different sample] will be taken from [where on the body]. The total amount will be [amount in teaspoons or tablespoons]. We will keep the sample for [a week/a month/a year//until xxx]

How are you protecting my privacy?

Your name will be taken off all of your research materials and a code number will be used instead. Only Dr. Researcher and his research colleagues and assistants will have any way to match your code number with your name. Dr. Researcher will not keep the list with your name and code number after the study is complete.

This is not a clinical or medical study. None of the information from this project will go into your medical record.

Can I quit if I become uncomfortable?

Yes, absolutely. Dr. Researcher and the Protection Board have reviewed the project and think you can join in the project safely. However, you can leave any time you wish. Participating is your choice.

Are there any risks to me?

You might experience some pain when blood is drawn and you might have a bruise where blood is taken. Although it is not common, sometimes people faint when blood is drawn. There is a slight risk of infection.

How will I benefit from participating?

You might find the research interesting. You might feel good about helping with research. To thank you for your help, you will receive XXX.

How long will participating take?

We are asking for an hour of your time.

If I have some questions about the study, who can I ask?

- John Q. Researcher, Ph.D., in the Department of Phrenology at Texas Tech University, is in charge of the study. If you have questions, you can call him at (806) 742-9999 #999.
- TTU also has a Board that protects the rights of people who participate in research. You can ask them questions at (806) 742-2064. You can also mail them at Human Research Protection Program, Office of the Vice President for Research, Texas Tech University, Lubbock, Texas 79409 or email at hrpp@ttu.edu.

Signature of Subject _____ Date_____

This consent form is not valid after xx/xx/xxxx.