**DIRECTIONS**

**1st-8th Grade Assent**

*This document is an example. There are various ways to set up this document. This is just one example for you to use.*

* Read the child assent form and adapt according to your research.
	+ Adapt **ORANGE TEXT** to fit your research.
	+ Delete all **RED TEXT** from the document.
* Format the document to un-bold the text and change the font color to black.
* A parent or legal guardian consent form is required when children are participating in research. The research team will provide an informed consent document to the parent. The research team will allow enough time for the participant to read the informed consent document and answer any questions the parent has about the research. The research team will ask the parent if they would like their child to participate in the research and have the parent sign the informed consent document. The research team will give a copy of the signed informed consent document to the parent. Once the parent signs the informed consent document, then the child can be approached to begin the assent process.
* Notice that this template is to provide guidance on how to create a child assent form. Due to the varying age groups this form should be adapted to accommodate such age groups.

**CHILD ASSENT-TEMPLATE**

Hello!

My name is **{TTU PI’s Name and Co-Investigator’s Name}**. I work at Texas Tech University. We are wanting to learn **{brief and basic description of your study}.**

We would like you to help us with this research. **{If you are providing an incentive a brief and basic description here.}** You can stop anytime. **{If there are any benefits or risks provide a brief description here.}**

If you want to participate in this study you can write your name **{point to the line}**, or you can tell **{parent or witness’ name}.**

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**OR**

Witnessed one of the following:

[ ]  Verbal consent

[ ]  Visual consent (Child signed the assent form)

Witness’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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