SAMPLE

Consent to Participate in a Research Study

I agree to participate in a research study entitled [insert title of study]. The purpose of this study is [describe the study, e.g. find out how to increase and improve parental involvement at the high school level with a focus on how culture plays a role in parental involvement]. I understand that I will be expected to participate and respond to [briefly describe the participation, e.g. two surveys regarding parental involvement as well as answer a few interview questions regarding the same topic].

I further understand:

- There are few risks associated with my participation in this study which may include validity.
- I may not directly benefit from participating in this research study.
- All records will remain private and any markers indicating my identity will be removed in any published report of this study.
- All records associated with this study will be stored securely by [insert researcher name], who will have sole access to these records.
- I understand that the interview will be recorded [describe how interview will be recorded, e.g. using notes and a voice memo]. This evidence will remain in the possession of [insert researcher name] for a period of not more than one year, at which time it will be destroyed.

My participation in this study is strictly voluntary and I can decline consent to be in the study at any time. Declining consent will not affect my current or future relationship with [insert researcher name] or [insert university name]. I can contact [insert instructor or advisor name] at [insert email address] or [insert phone number] before or after my participation with any questions related to this study.

All research is reviewed by a committee that works to protect participant rights and welfare. If participants have questions or concerns about their rights as a research subject, they may contact the [insert university name] Institutional Review Board by email to [insert IRB email address].

Participant's Agreement

I have read the information provided above. I have asked all the questions I have at this time. I voluntarily agree to participate in this research study.

| Name: | | | |
|------------|--|--|--|
| Signature: | | | |
| Date: | | | |