

IRB – Informed Consent Form

For all studies

Title of Research Project:

Principle Investigator(s):

Purpose of the Research and Number of Participants: Clearly state the study's purpose, how many people will be in the study, and the age group of participants.

Procedures and Location: Provide a description of what participants will do, how often, and where the study will take place. Identify any experimental aspects.

Duration of Participation: State how long participation will take (minutes/hours per session, number of visits, total timeframe).



Risks or Discomforts: List all reasonably foreseeable risks or inconveniences (physical, psychological, social, legal, economic).

Benefits: Explain direct benefits to participants and/or societal or scientific benefits.

Alternatives to Participation (if applicable): If the study involves treatment/intervention, describe appropriate alternatives available outside the research.

Compensation or Incentives (if any): Explain any payment or reimbursement participants may receive.



Confidentiality: Explain how information will be collected, stored, and protected, and who will have access.

Research-Related Injury (if greater than minimal risk): State whether compensation or medical treatment is available if injury occurs, and where participants can obtain more information.

Voluntary Nature of Participation and Right to Withdraw: Describe that participation is voluntary and participants may refuse to answer questions, or withdraw at any time, without penalty or loss of benefits.

PI's Contact Information Regarding Research Questions:



Contact Information Regarding Rights as a Research Participant:

Caroline Stanton
Compliance and Research Officer
Office of Sponsored Programs and Research
205-652-3403, cstanton@uwa.edu

Notices (if applicable): Describe any special information participants need to know, such as whether audio or video recordings will be made, data will be shared, results will be returned to participants, or if biospecimens could result in commercial profit.

Broad Consent for Future Use (if applicable): Are you willing to give consent for future research use of de-identifiable information or biospecimens collected in this study?

☐ Yes ☐ No

Participant Consent & Signature:

"I have read (or been read) this consent form. I understand the information provided and voluntarily agree to participate in this research."

Printed Name of Participant: _____

Signature of Participant: _____ **Date:** _____

Printed Name of Researcher Obtaining Consent: _____

Signature of Researcher Obtaining Consent: _____ **Date:** _____