

University of Southern Maine SAMPLE CONSENT FORM Format

Heading (e.g. University of Southern Maine School of Social Work)

**Informed Consent for Taking Part as a Subject in a Research Study
"Students' Thoughts and Feelings about War"**

Why have I been asked to take part in the study?

- Because you are a student at least 18 years of age
- Because you might have an interest in sharing your thoughts and feelings about war.

What do I do first?

- Before agreeing, please read this form.
- Please ask any questions that you may have.

What is the Study about?

- What people think and feel about war in general.

Who will take part in the Study?

- About 50 college students at USM from different majors.

If I agree to take part, what will I be asked to do?

1. Answer 10 questions for about 30-45 minutes.
2. If you do not wish to answer a question, you can choose to skip it.
3. Allow us to record the interview.
4. If you do not wish to have your answers recorded, please tell us. We will not record them.

What are the risks to being in the study?:

- There are no expected risks.

What are the benefits to being in the study?

- There are no expected benefits.

How will things I say be kept private?

- The records of this study will be kept private.
- In any type of report we may write, we will not include your name or anyone else's.
- Research records (including tape recordings) will be kept in a locked file.
- Research records will be destroyed within 3 years.
- Access to the research records will be limited to the researchers.

- However, sometimes, sponsors, funders, regulators, and the University IRB may have to review the research records.

What if I choose to not take part or leave the study?

- Taking part in the study is voluntary.
- If you choose not to take part, it will not affect your present or future relations with the University.
- You are free to leave the study at any time, for whatever reason.
- You will not be penalized or lose benefits for not taking part.
- You will not be penalized or lose benefits if you stop taking part in the study.

Will I be asked to leave the Study?

- We ask that you follow the directions the best you know how.
- If you are unable to do so, or the sponsor cancels the study, you may be asked to leave.

Who can I contact if I have any questions?

- You can call [*put in name(s) of researchers, including the PI*] who is the researcher in charge of this study. Their number is _____ [*telephone number or other way to contact person*].
- If you believe you may have suffered injury or harm from this research, call [*put in name, usually researcher*] at [*telephone number*]. He/she will tell you what to do next.
- If you have any questions about your rights as a person taking part in the study, you may call: Director, Office of Research Compliance, USM at (207)780-4517, or usmirb@usm.maine.edu, or TTY (207)780-5646.

Will I get a copy of this consent form?

- Yes, you can keep it for your records and future reference.

Statement of Consent:

- I have read (or have had read to me) the contents of this consent form.
- I have been encouraged to ask questions.
- I have received answers to my questions.
- I give my consent to take part in this study.
- I have received (or will receive) a copy of this form.

Signatures/Dates:

Study Participant (Print Name): _____

Participant or Legal Representative Signature: _____ Date _____