

TEXAS A&M UNIVERSITY-SAN ANTONIO
GRADUATE STUDIES AND OFFICE OF RESEARCH
INFORMATION SHEET



TITLE OF STUDY:

PROTOCOL NUMBER:

DEAR STUDY PARTICIPANT:

You are invited to participate in a research study of [Insert general statement about study].
You were selected as a possible participant because [Explain how subject was identified].
We ask that you read this form and ask any questions you may have before agreeing to be in the study.

This study is being conducted by: [Name of PI, department (indicate University affiliation)]

Background Information

The purpose of this study is: [Explain research question and purpose in lay language]

Procedures:

If you agree to participate in this study, we will ask you to do the following things:

[Explain tasks and procedures: subjects should be told about video or audio taping, assignment to study groups, length of time for participation, frequency of procedures, etc.]

Risks and Benefits of participating in the Study

The study has several risks:

First, [Risk];

Second, [Risk]

(Risk must be explained, including the likelihood of the risk. If there are significant psychological risks to participation, the participant should be told under what conditions the researcher will terminate the study. If the risks are no greater than those encountered in everyday life, this should be stated.)

The benefits to participation are:

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[Benefit(s)] *(If no benefits, state that fact here.)*

Compensation:

You will receive payment: [Include payment or reimbursement information here.]
(If subjects receive class points or some other token, include that information here. Explain when disbursement will occur and conditions of payment. For example, if monetary benefits will be prorated due to early withdrawal.)

Confidentiality:

The records of this study will be kept private. In all reports resulting from this study, we will not include any information that will make it possible to identify you as a participant. Research records will be stored securely and only researchers will have access to the records.
(If tape recordings or videotapes are made, explain who will have access, if they will be used for education purposes, and when they will be erased.)

Voluntary Nature of the Study:

Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with Texas A&M University-San Antonio [or with other cooperating institutions, insert names here]. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

Contacts and Questions:

The researchers conducting this study are: [Name of researcher] and [Name of researcher]. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact the Principal Investigator at [Location], [Phone number], [E-mail address].
(If the researcher is a student, include advisor's name, telephone number and e-mail address here.)

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher(s), **you are encouraged** to contact Dr. Brent M. Snow, Director of Graduate Studies and Office of Research at (irb@tamusa.edu or brent.snow@tamusa.edu).
Phone (210) 784-2317 or (210) 784-1516

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Comments:

1. Check boxes were removed. This template would apply to other scenarios for which signed consent is not required. It can be tailored for different purposes if needed.