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**INFORMATION AND CONSENT FORM**

**Study Title:**

**Student:**

**Student’s Contact Information:**

**Faculty Supervisor:**

**Faculty Supervisor’s Contact Information:**

**Source of funding for the study:**

You are being invited to participate in the research study mentioned above. This form provides information about what participating would mean. Please read it carefully before deciding if you want to participate or not. If there is anything you do not understand, or if you want more information, please ask the researcher.

**A. PURPOSE**

The purpose of the research is [ ].

**B. PROCEDURES**

If you participate, you will be asked to [ ]

In total, participating in this study will take [ ].

**C. RISKS AND BENEFITS**

You might face certain risks by participating in this research. These risks include: [ ]

OR

Potential benefits include: [ ]

OR

This research is not intended to benefit you personally.

**D. CONFIDENTIALITY**

We will gather the following information as part of this research: [ ]

We will not allow anyone to access the information, except people directly involved in conducting the research. We will only use the information for the purposes of the research described in this form.

I understand that my participation in this project is (*pick appropriate word*):

 CONFIDENTIAL (i.e., the student consultant will know, but will not disclose my identity)

 **OR**

 NON-CONFIDENTIAL (i.e., my identity will be revealed in project results)

I understand that the results of this project may be published online or in print form. However, my identity will not be disclosed, and my contributions will remain confidential if I so choose. The identity of the organization will also be confidential, and an institutional representative will review the report prior to publishing to ensure a favorable harm-benefits balance (benefits to the greater community versus harm to the organization). The institutional representative may, at that time, require that some of the findings be revised before giving consent to publish.

We will protect the information by [ ]

We will destroy the information five years after the end of the study.

**F. CONDITIONS OF PARTICIPATION**

You do not have to participate in this research. It is purely your decision. If you do participate, you can stop at any time. You can also ask that the information you provided not be used, and your choice will be respected. If you decide that you don’t want us to use your information, you must tell the researcher before [ ].

*If participants are being offered compensation:*

As a compensatory indemnity for participating in this research, you will receive [ ]. If you withdraw before the end of the research, you will receive [ ].

To make sure that research money is being spent properly, auditors from Concordia or outside will have access to a coded list of participants. It will not be possible to identify you from this list.

There are no negative consequences for not participating, stopping in the middle, or asking us not to use your information.

**G. PARTICIPANT’S DECLARATION**

I have read and understood this form. I have had the chance to ask questions and any questions have been answered. I agree to participate in this research under the conditions described.

NAME (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have questions about the scientific or scholarly aspects of this research, please contact the student. Their contact information is on page 1. You may also contact their faculty supervisor.

If you have concerns about ethical issues in this research, please contact the chair of the Department of Applied Human Sciences Human Research Ethics Committee: <insert the name and email address for the current chair>