

[Researchers may use this “boiler-plate” Informed Consent form, or use it as a guide to create an individualized Informed Consent form. Replace all the current text below with your own. If verbal informed consent is used, a copy of what will be related to the human subjects must still be filed with your HSIRB proposal.]

1. Indicate the title of research, who you are, and why you are performing the research.
2. Describe the subject's participation in this research.
3. Describe the expected duration of the subject's participation.
4. Since there is no such thing as “no risk” in human endeavors, describe the anticipated level of risk presented by this research to the subject (or to the embryo). If there are no anticipated risks, state so.
5. Describe the subject's anticipated benefit, if any, for participating in this research. If none, state so.
6. Describe how and the extent to which the subject's records will be kept confidential during the research.
7. Describe what will happen to the subject's records at the conclusion of the research.
8. Indicate the contact information for a person or office in the event of unanticipated physical injury during the research.
9. Indicate the contact information for a person or office in the event of unanticipated psychological injury during or after the research.
10. Indicate that participation in this research is voluntary. State that refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled. State that the subject may discontinue participation at any time.
 - a. List the potential consequences, if any, of withdrawing from this research. If none, state so.
 - b. Describe the process for withdrawing from this research.
11. Indicate the contact information for a person or office to answer questions about this research and the subject's rights. *(For student research, this is generally the faculty sponsor, not the HSIRB or HSIRB Chair!)*

I attest that I am at least 18 years of age, that I read and understand this consent form, and that I received a copy.

Subject signature: _____ Date: _____

I attest that I am the subject's legally authorized guardian (representative), that I read and understand this consent form, and that I received a copy.

Legal representative signature: _____ Date: _____