



Consent Form Template

You are being asked to be part of a research study, entitled [[name of study](#)]. Please read this form carefully and sign if you consent to participate.

Purpose of Study: The purpose of this study is [[description of purpose for study](#)].

Study Procedure: As a participant you will be asked to [[description of what participant will do as part of the study](#)]. Your participation is expected to take [[expected duration of subject's participation](#)]. [[Include here a notification if any of the study interventions are experimental](#)].

Risks: As a participant you may experience the following risks or discomfort: [[description of potential risks or discomfort from study participation](#)].

Benefits: As a participant you may experience the following benefits: [[description of benefits from study participation, including any compensation offered for participation](#)].

Confidentiality: [[If appropriate, a statement describing how confidential information will be protected](#)]

Participation in this study is completely voluntary and you may discontinue participation at any time. Refusal to participate or discontinuing participation will have no effect on [[description of benefits to which the subject is otherwise entitled; e.g., grade in the course, standing with the College, etc.](#)]. [[If appropriate, include a description of alternative interventions or options that the subject may choose if they do not consent to participate; e.g., alternative extra credit assignment if extra credit is offered for study participation](#)].

If you have any questions or concerns about this study at any time, please contact [[principal investigator's name and contact information](#)]. If you would prefer not discussing your question or concern with the researcher, please contact Green River Community College - Office of Institutional Effectiveness at 12401 SE 320th Street, Auburn, WA 98092-3622, Phone Number (253) 833-9111, ext. 2684.

Statement of Consent: I have read the above summary of this research project. I understand the nature and extent of my participation in this project and the possible risks involved or arising from it. I understand that I may withdraw my participation from this project at any time without prejudice or penalty of any kind. By signing this form, I agree to participate in this project.

Signature: _____ Date: _____