

PLEASE NOTE: Statements *in red, brackets and/or italics* are instructions or examples. Delete this statement before distributing.

INDIANA**TECH**

ASSENT TO BE IN A RESEARCH STUDY

For adolescents 13-17 years old

What is this study about?

Name investigators here from *name institution here are/is* doing a research study. The study will *identify research purpose here*.

I hope this study will *identify research goal here*. That's why I am doing the study.

Because you *identify participant criteria*, I am asking if you want to be in this study.

How many people will take part in this study?

About *identify number of participants* will be in this study.

What will happen if you decide you might want to be in this research study?

First, your parent or guardian will be asked if they give their permission for you to be in this study. If your parent or guardian doesn't agree, you cannot be in the study. If your parent or guardian does agree, and you agree too, here's what will happen next:

- 1. Identify the research procedures. Number each step.*

Will any parts of this study hurt or have other risks?

Identify any risks. Use bullet points for simplicity if necessary.

Will this study help me?

You will not receive any benefits from being in this study. However, the study is aimed to understand other people.

What if you have questions?

You can ask *name researchers here* any questions you have about the study. You can ask your questions now or later – any time you like. You can also ask your parents to ask questions for you.

What are your choices?

If your parent or guardian agrees, you can be in this study if you want to. But, you don't have to be in it if you don't want to. Nobody will get mad at you if you don't want to do this.

If you decide to be in the study now and change your mind later, that's okay, too. You just have to tell the *identify researchers here* as soon as you change your mind, and you will be taken out of the study.

If you don't want to be in this study, you do not need to sign this form.

If you want to be in this study, please sign your name below. If you sign this form, it means you agree to participate in this study. But, you can always change your mind later if you want.

I will give you a copy of this form to keep.

Adolescent's Signature

Date

Age

Adolescent's Name (*print*)

Signature of Person Conducting Assent Discussion

Date

Name of Person Conducting Assent Discussion (*print*)