

**Note: This form is NOT to be filled out. It is intended to be used as a guide in developing an informed consent document. The italicized statements are key components and should be included in your informed consent document.**

## INFORMED CONSENT DOCUMENT

The Department of \_\_\_\_\_ at Emporia State University supports the practice of protection for human subjects participating in research and related activities. The following information is provided so that you can decide whether you wish to participate in the present study. You should be aware that even if you agree to participate, you are free to withdraw at any time, and that if you do withdraw from the study, you will not be subjected to reprimand or any other form of reproach.

*Procedures to be followed in the study, identification of any procedures which are experimental, and approximate time it will take to participate.*

*Description of any attendant discomforts or other forms of risk involved for subjects taking part in the study.*

*Description of benefits to be expected from the study or research. Appropriate alternative procedures that would be advantageous for the subject.*

*"I have read the above statement and have been fully advised of the procedures to be used in this project. I have been given sufficient opportunity to ask any questions I had concerning the procedures and possible risks involved. I understand the potential risks involved and I assume them voluntarily. I likewise understand that I can withdraw from the study at any time without being subjected to reproach."*

\_\_\_\_\_  
Subject

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian (if subject is a minor)

\_\_\_\_\_  
Date