IRB Information Sheet Template

Project Title:

Principal Investigator:

Faculty Advisor:

**What is this all about?**

I am asking you to participate in this research study because [insert purpose of the study in simple language]. This research project will only take about [insert amount of time and or sessions] and will involve you [insert the requirements of the participants i.e. interview, survey, or etc.]. Your participation in this research project is voluntary.

**How will this negatively affect me?**

No, other than the time you spend on this project there are no know or foreseeable risks involved with this study.

**What do I get out of this research project?**

You and/or society will or might [If there are any direct benefits to the community or to the participants add them here] or [If there is no benefit please insert here].

**Will I get paid for participating?**

You will be paid [insert reimbursements for gas, parking, time, inconvenience, and clearly state if compensation will be prorated]. [If there is no compensation please state so here.]

**What about my confidentiality?**

We will do everything possible to make sure that your information is kept confidential. All information obtained in this study is strictly confidential unless disclosure is required by law. We will [insert measures to ensure confidentiality i.e. we will not ask for any identifying information, use of pseudonyms, data storage.] [

**For Internet Research, include this wording:** “**Absolute confidentiality of data provided through the Internet cannot be guaranteed due to the limited protections of Internet access.** **Please be sure to close your browser when finished so no one will be able to see what you have been doing."Alternatively, add security statement from commercial survey tool used for the study.**

**If using audio-recording add:** “Because your voice will be potentially identifiable by anyone who hears the recording, your confidentiality for things you say on the recording cannot be guaranteed although the researcher will try to limit access to the recording as described in this section.

**What if I do not want to be in this research study?**

You do not have to be part of this project. This project is voluntary and it is up to you to decide to participate in this research project. If you agree to participate at any time in this project you may stop participating without penalty. [if your compensation is prorated please state so here.]

**What if I have questions?**

You can ask [**insert the PI’s name and contact information AND Faculty Advisor’s name and contact information (if applicable)**] anything about the study. If you have concerns about how you have been treated in this study call the Office of Research Integrity Director at 1-855-251-2351.