

Mills College Human Subjects Protocol
Sample Informed Consent Form

“Title of Project”
Informed Consent

I, [NAME OF PARTICIPANT], state that I am over 18 years of age and that I voluntarily agree to participate in a research project conducted by [NAME OF PRINCIPAL INVESTIGATOR, TITLE, INSTITUTIONAL AFFILIATION].

The research is being conducted in order to [BRIEF DESCRIPTION OF THE GOALS OF THE RESEARCH]. The specific task I will perform requires [DETAILS OF THE RESEARCH TASK INCLUDING INFORMATION ABOUT THE DURATION OF PARTICIPANT’S INVOLVEMENT. ANY POSSIBLE DISCOMFORT TO PARTICIPANT MUST ALSO BE DESCRIBED.]

I acknowledge that [NAME(S) OF PRINCIPAL INVESTIGATOR OR RESEARCH ASSISTANT(S)] has (have) explained the task to me fully; has informed me that I may withdraw from participation at any time without prejudice or penalty; has offered to answer any questions that I might have concerning the research procedure; has assured me that any information that I give will be used for research purposes only and will be kept confidential. [PROCEDURE FOR PROTECTING CONFIDENTIALITY OF RESPONSES SHOULD BE EXPLAINED.] [IF THIS PROJECT INCLUDES DATA THAT IS IDENTIFIABLE IN ANY WAY, SUCH AS VIDEO, AUDIO TAPE, PHOTOGRAPHS ETC., INCLUDE THE FOLLOWING: I understand that any use of the [VIDEO, AUDIO TAPE, ETC.] that result from my participation in this study will not be used for purposes that are not directly related to research venues, such as presentation in meetings or conferences open to the public or press, without my further written consent. I understand that individuals associated with this research may request now or at some time in the future an extension of the permissions for the use of this information that I consent to here.]

I also acknowledge that the benefits derived from, or rewards given for, my participation have been fully explained to me-as well as alternative methods, if available, for earning these rewards- and that I have been promised, upon completion of the research task, a brief description of the role my specific performance plays in this project. [THE EXACT NATURE OF ANY COMMITMENTS MADE BY THE RESEARCHER, SUCH AS THE AMOUNT OF MONEY TO BE PAID TO INDIVIDUALS FOR PARTICIPATION, SHOULD BE SPECIFIED HERE.] I understand that I may contact [NAME OF PRINCIPAL RESEARCHER, PHONE NUMBER, STUDENT’S ADVISOR IF THE RESEARCHER IS A STUDENT, AND MILLS COLLEGE DEPARTMENT AND PHONE NUMBER] if I have questions about this study at a time following my participation.

(Signature of researcher)

(Signature of participant)

(Date signed)

(Date signed)