

Appendix B: Written Informed Consent Form Template

Introduction. You are invited to participate in a research study entitled *add name of study*.

Procedures. *Provide a thorough statement regarding the purpose and methodology of the research, the expected duration, and the procedures of the subject's participation.* This *survey/interview* will take approximately [**time**] to complete.

Risks. The potential risks of participating in this study are: *Outline the possible risks (e.g. risk of breach of confidentiality).*

Benefits. Anticipated benefits from this study are add the potential benefits to *Nazarbayev University, science, and possibly the participants.*

Compensation. No tangible compensation will be given. A copy of the research results will be available at the conclusion of the study (*explain how*).

Confidentiality & Privacy. Any information that is obtained during this study will be kept confidential to the full extent possible. All efforts, within reason, will be made to keep your personal information in your research record confidential but total confidentiality cannot be guaranteed. *[Insert a description of how records and data/specimens will be stored and maintained and who will have access. Describe any study specific issues that may increase the risk of breach of confidentiality.]*

Voluntary Nature of the Study. Participation in this study is strictly voluntary, and if agreement to participation is given, it can be withdrawn at any time without prejudice.

Points of Contact. It is understood that should any questions or comments arise regarding this project, or a research related injury is received, the Principal Investigator, *Dr. Joe Researcher*, +8.778.656.9999, *joe.researcher@nu.edu.kz* should be contacted. Any other questions or concerns may be addressed to the Nazarbayev University Institutional Research Ethics Committee, *resethics@nu.edu.kz*.

Statement of Consent.

I, _____

Give my voluntary consent to participate in this study.

The researchers clearly explained to me the background information and objectives of the study and what my participation in this study involves.

I understand that my participation in this study is voluntary. I can at any time and without giving any reasons withdraw my consent, and this will not have any negative consequences for myself .

I understand that the information collected during this study will be treated confidentially.

Signature: _____ Date: _____

Researcher:

Signed _____ Date _____