

UNIVERSITY OF SOUTHERN MINDANAO Insert College Insert Program



ASSENT FORM

Introduction

My/our name is [provide your full name/s], from [college, university]. I/we am/are inviting you to participate in a research study about [research title]. Your parent/s or /guardian/s know we are talking with you about the study. This form will tell you about the study to help you decide whether or not you want to take part in it.

Key information of the study

The following is a short summary of this study to help you decide whether you want to be a part of this study. Information that is more detailed is listed later on in this form. [The following should be all one paragraph:]

The purpose of this study is [insert purpose here]. You will be asked to [include a detailed statement of the procedures that will be done]. We expect that you will be in this research study for [hours/days/months/weeks/years, until a certain event].

Risk and benefits

There are no foreseeable risks however some kids [describe potential risks/inconveniences to the child, including but not limited to fatigue, boredom, anxiety, etc. in simple language. Explain what you will do to minimize or handle those risks/inconveniences. For example: "If you become tired, let me know. We will take a short break"]

If you take part in this study, you might [explain the benefit(s) for the child in simple language, if applicable] [If there are no direct benefits to the child, use the following statement: Taking part in this study may not have direct benefits to you, but it will help me learn [explain what the researcher will gain from this study in simple language.]

Purpose of the study

The purpose of the study is to [explain why the research is being done using language that is appropriate to the child's age and maturity. Keep the explanation brief.] You are being asked to take part in the study because [explain why the child is a potential participant.] You cannot take part in this study if [list any exclusion criteria, if applicable.]

Role of the participant

If you decide to be in the study, I will ask you to [describe what the child will be asked to do in simple language that is appropriate to the child's age and maturity. If the child will be asked to do several things, describe each one. Explain how long each activity will last. If you are going to audio or video record, you should mention it here and explain that you won't record the child without their permission].

Role of the researcher and contact information

[Include all roles if adverse effects or other unexpected effects occur]



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[Include all means possible to contact the researcher/s]

Research Participant's Consent

given the chance to clarify and be informed of this s satisfaction, and I agree to participate in this study aware that I have the right to withdraw my consen	have read the information provided above. I have been study. My questions, if any, have been answered to my . I have been given a copy of this form and I am fully t at any time and discontinue my participation without
penalty.	
Signature of Participant	 Date Signed
(Thumbmark if unable to sign)	3

Researcher Obtaining Consent

I/we have explained the entirety of the research to the participant/informant/respondent and answered all of his/her questions. I believe that he/she understands the information described in this document and freely consent to participate in this research study.

Name and signature of Researcher

Note: Researcher must **PRINT** the form and place fresh signature (use blue ballpoint pen) above. **DELETE** this note in the actual Form..