Informed Consent to Participate in an Online Research Project
Instructions for Researchers

Delete these instructions before submitting the informed consent form (page 2 below) to the RREC for review.

Please note that there are different consent form templates for online and in-person studies. These differ primarily in the *Confidentiality of Data* section The in-person consent form template can be found in the RREC Google Drive

- The *Description of the Study* section below must include sufficient information about the for a reasonable participant to make an informed decision about whether they want to participate or not. The committee acknowledges that offering too much information might harm the validity of the data. Within that constraint, be as precise as you can. Stating the participant will answer questions about *self-esteem* is better than *personality*, which is better than saying only that they will answer questions.

    - The *Description of the Study* section below should state that you will ask demographic questions, if your study includes demographic measures.

- The *Adverse Effects and Risks* section should describe any and all risks, psychological and/or physical, that rise above minimal. *Minimal risk* means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests. While all studies have some risk to them, minimal risk events (e.g. getting a paper cut while handling the consent form) need not be mentioned.

    - This section should describe available resources if psychological risks are possible, including contact information for the counseling center, explain why someone might want to contact the counseling center, and mention that its services are free for UD undergraduate students. If you are asking questions that might indicate that the participant might benefit from counseling, you must include the following standard language in the consent form's *Adverse Effects and Risks* section:

        > Participants might experience negative feelings such as while answering some questions. Counseling services are provided as a free service to undergraduate students. If you are experiencing *insert name again*, you may contact the University of Dayton Counseling Center at (937) 229-3141. You may call after normal business hours and the on-call staff member will return your call. If you feel any discomfort or distress while participating in this study, you are free to terminate your participation at any time without penalty.

    - For studies including samples outside of UD, provide information regarding widely or readily-available resources (e.g., MentalHealth.gov, which has resources for immediate help and finding local mental health services) for those who may experience psychological distress as a result of participation in the study. You may use the following as a template for including such information:

        > Participants might experience negative feelings such as *insert the name of whatever negative feelings your questionnaire might cause, e.g. anxiety* while answering some questions. If you are experiencing *insert name again*, you may find the following recources helpful: *include web or other resources as liste in the instructions above.* If you feel any discomfort or distress while participating in this study, you are free to terminate your participation at any time without penalty.

- The *Anticipated Benefits* section should describe any benefits to the participants or to others that may reasonably be expected from the research. If consent will be obtained from a legal representative of the participant, the direct benefit to the participant must be elaborated in the consent form. If there is no likelihood that participants will benefit directly from their participation in the research, state as much in clear terms. For example: "There are no direct benefits to you, other than that you may learn or gain some insight about a particular aspect of human psychology." Do not include compensation/payment for participating in this section.

- The *Compensation for Participation* section must state whether the participant will be paid or offered other compensation for participation (e.g., course credit). If not, state so. If the participant will receive payment, describe remuneration amount, when payment is scheduled, and prorated payment schedule should the participant decide to withdraw or be withdrawn by the investigator. If the participant will be reimbursed for expenses such as parking, bus/taxi, etc., state so.

    - Many studies will simply need to report that participants will receive a certain amount of course credit towards a course requirement (i.e., credits via SONA). If an incentive/compensation of any monetary value is used (e.g. remuneration via an online participant pool such as mTurk or Prolific, gift cards, cash, entry in a raffle, etc.), the compensation must adhere to the IRB Guidance for Incentive Payments to Research Participants. This guidance requires the inclusion of additional text in the informed consent depending upon the amount/size of the incentive/compensation.

- If you are using deception, make sure that the deception is *absolutely* necessary and that the goals of the study cannot be met without the use of deception. If you deceive, you cannot include anything about the deception in the consent form (that is, the consent form must accurately reflect what happens in the study) and you must clarify in the debriefing how participants were deceived (see the debriefing template for additional guidance).

Informed Consent to Participate in a Research Project

Project Title:	*Insert the title of your study here*
Investigator(s):	*Insert your name here and if this is a student-led study, insert faculty sponsor's name here, with degree (Ph.D.) (faculty sponsor)*
Description of Study:	*Insert a description of your study and what will happen to the participant. It must include all information that a reasonable participant would want to know about the study in order to make an informed decision as to whether to participate or not.*
Adverse Effects and Risks:	*Describe all adverse effects and risks that might arise in your study.*
Anticipated Benefits:	*Describe anticipated direct benefits to participants resulting from their participation in the research. If there is no likelihood that participants will benefit directly from their participation in the research, state as much in clear terms.*
Duration of Study:	The study will take approximately *insert duration* to complete.
Compensation	*Describe compensation for participation (e.g., course credit or payment). Note that compensation with monetary value requires additional information to be included in this form.*
Confidentiality of Data:	Your name will be kept separate from the data. A risk of breach of confidentiality always exists in online studies, but steps have been taken to minimize this risk, through the use of secure SSL connections between the study server and your browser. Both your name and the data will be kept on secure study servers and/or the researchers' computers. Only the investigators named above will have access to the computers containing your data. Your name will not be revealed in any document resulting from this study. *Modify the above paragraph as needed or supplement with additional information here, particularly with regard to steps taken to encrypt or anonymize data accessed or stored online.*
Contact Person:	If you have any questions about this study, you may contact *insert your name, office, phone number and email address or, if this is a student-led study, insert the faculty sponsor's name, office, phone number and email address.* If you have questions about your rights as a research participant you may also contact the chair of the Research Review and Ethics Committee at rrec@udayton.edu, or (937) 229-2713, or in SJ 329.
Consent to Participate:	I have voluntarily decided to participate in this study. The investigator named above has adequately answered any and all questions I have about this study, the procedures involved, and my participation. I understand that the experimenter will be available to answer any questions about research procedures throughout this study. I also understand that I may voluntarily terminate my participation in this study at any time without penalty. I also understand that the investigator named above may terminate my participation in this study if s/he feels this to be in my best interest. In addition, I certify that I am 18 (eighteen) years of age or older. _____ Signature of Student Student's Name (printed) Date

	_____ Signature of Witness Date

The University of Dayton supports researchers' academic freedom to study topics of their choice. The topic and/or content of each study are those of the principal investigator(s) and do not necessarily represent the mission or positions of the University of Dayton.