

UCSF – Informed Consent Form for Human Participant Study

Student Researcher(s): _____
Title of Project: _____
School: _____

I am asking for your voluntary participation in my science fair project for the United Counties Science Fair. This letter provides the information required for you to make an informed decision about whether to participate. Please read the following information about the project. If you would like to participate, please sign and return the attached "Informed Consent Form for Human Participant Study"

Purpose of the project: _____

Benefits: _____

Potential Risks of Study: _____

Time required for participation: _____

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If you participate, you will be asked to: _____

Remuneration: There is no remuneration for participating in this project

How confidentiality will be maintained: _____

NOTE: If require more space to write, attach additional pages to this from

Voluntary Participation

- ✓ Participation in this study is completely voluntary.
- ✓ If you decide not to participate there will not be any negative consequences.
- ✓ Please be aware that if you decide to participate, you may stop participating at any time and you may decide not to answer any specific question.
- ✓ No information will identify you personally
- ✓ All information will be presented anonymously in the project report
- ✓ Contact the Adult Supervisor by phone or email if you wish to withdraw

CONTACT INFORMATION

If you have any questions about this study, or wish to withdraw, contact:

Adult Supervisor: _____

phone/email: _____

Address: _____

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I have received the "Letter of Information for Human Participant Study", have had the nature of the study explained to me, and I agree to participate. All questions have been asked to my satisfaction.

Voluntary Participation

Participation in this study is completely voluntary. If you decide not to participate there will not be any negative consequences. Please be aware that if you decide to participate, you may stop participating at any time and you may decide not to answer any specific question.

By signing this form, I am attesting that I have read and understood the information and I freely give my consent/approval to participate or permission for my child to participate.

This research project has been reviewed and approved by the
Ethics Committee of the United Counties Regional Science Fair

Print Name of Research Participant: _____

Signature: _____

Date Reviewed and Signed: _____

If the participant is under 18 years of age, then a parent or guardian must also give permission

Parental/Guardian Permission (if applicable): _____

Date Reviewed and Signed: _____

Person Obtaining Consent (*print name*): _____

Signature of Person Obtaining Consent: _____

Title of Project: _____

School: _____

Adult Supervisor (*print name*): _____

Adult Supervisor Signature: _____