



Center for the Advancement
of Teaching

Student Consent Form

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Title of Study:
Investigator:

Temple University Institutional Review Board (IRB) Contact Information:
Email: irb@temple.edu
Phone: 215-707-3390

Student Consent

You are being asked for your consent to take part in a research study. This document provides a concise summary of this research. It describes the key information to assist you in deciding whether to take part in this research. Later sections of this document will provide all relevant details.

What should I know about this research?

- Someone will explain this research to you.
- Taking part in this research is voluntary. Whether you take part is up to you.
- If you don't take part, it won't be held against you.
- You can take part now and later drop out, and it won't be held against you.
- If you don't understand, ask questions.
- Ask all the questions you want before you decide.
- The most important benefits that you may expect from taking part in this research include _____. In simple language, explain the reasonably expected benefits to subjects that are most likely to affect someone's decision about whether to take part in the research study. If there are no benefits, state: It is not expected that you will personally benefit from this research.
- Possible benefits to others include _____. In simple language, explain the reasonably expected benefits to others that are most likely to affect someone's decision about whether to take part in the research study.

- We expect that your taking part in this research will last _____. (specify time period - hours, days, weeks, months, years, or until a certain event).
- The purpose of this research is to _____. Explain in no more than a few sentences the main purposes of the research.
- If you decide to take part in this research study, the general procedures include _____. Briefly outline in simple terms the procedures that are key to the research and are most likely to affect someone's decision about whether to take part in the research study.
- If applicable to your study, detail the use of audio recording, the procedures involved, and that the recordings will be accessed and analyzed after the semester has concluded.
- If applicable to your study, detail how and why direct quotes may be used.
- The most important risks or discomforts that you may expect from taking part in this research include _____. In simple language, explain the risks and discomforts that are most likely to affect someone's decision about whether to take part in the research study. Identify the most important risks, like the information that a doctor might deliver in the clinical context. Emphasize how those risks are changed by taking part in the study. Include the complete list of reasonably foreseeable risks in the main body of the consent form.
- Instead of being in this research, your choices may include _____.
- This research has been fully explained to me. I hereby acknowledge that I am consenting to participate in this study without duress. I am of sound mind when making this decision.

What happens to the information collected for this research?

- To the extent allowed by law, we limit the viewing of your personal information to people who have to review it. We cannot promise complete secrecy. There is a mild risk of breach of confidentiality. Your participation in this research will be held strictly confidential, however, confidentiality cannot be guaranteed. The IRB, Temple University and its affiliates, and other representatives of these organizations may inspect and copy your information. Measures will be taken to ensure that your participation in the study be confidential. If you decide to participate in the study, your information will be deidentified by _____. Explain how you will deidentify participant information (e.g., being given a participant ID number, pseudonym, etc.). This will be used in place of your name, and all personal identifiers will be securely stored with password protection. Only investigators will have access to this data.

Who can answer questions about this research?

- Questions about this research can be directed to the primary investigators of this study or the Temple University IRB. Contact information for each can be found at the top of this consent form.

Participant Name: _____

Participant Signature: _____

Date of Signature: _____