SAMPLE SAMPLE SAMPLE SAMPLE

Consent Form

Overview

In this study, you will be asked to (BRIEF DESCRIPTION OF PROCEDURE). The study lasts approximately (DURATION). There are no anticipated risks or discomforts associated with this research. Through this work, we hope to gain a better understanding of people's perceptions of social relationships.

It is important to point out that this is basic research in psychology. We do not evaluate individual responses. Rather, we are interested in general trends. Individual results are confidential. Research participants are identified only by an assigned ID number, with no names of participants appearing on the response forms. There is no expected risk or discomfort associated with the procedure.

Consent Agreement

I have read and understood the above statement and voluntarily consent to participate in this study. I understand that I may ask questions concerning the study, both before agreeing to be involved and during the course of the study as well as that I may refuse to participate before the study begins, discontinue at any time, or skip any questions without penalty or any effect on my academic standing or record. Further, I consent to the publication of study results as long as the information is anonymous and disguised so that no participant-specific identification can be made. I also understand that concerns about any aspect of this project may be reported—anonymously, if desired to the Institutional Review Board-Human Subjects Committee coordinator, at (212) 229-5727 ext. 3102.

I, the undersigned, have understood the above explanation and give consent to my voluntary participation in (NAME OF PRINCIPAL INVESTIGATOR's research project).

Signature of Participant: _____ Date: _____

Principal Investigator:
NAME
Department of Psychology
New School for Social Research
Phone: _____

SAMPLE SAMPLE SAMPLE SAMPLE