# Sample Participant information and consent form

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| **Instructions for using this form**  This is an example form and may not be suitable for your research project. It has been modified for simplification from the NHMRC’s template [Participant Information Sheet/Consent Form](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwietK_i_pyNAxUIxjgGHRDwByMQFnoECBgQAQ&url=https%3A%2F%2Fwww.nhmrc.gov.au%2Fsites%2Fdefault%2Ffiles%2Fdocuments%2Fattachments%2FPICF%2FPICF-health-social-science-self.doc&usg=AOvVaw2sp7JG5-qqK4Jutgt4jmXB&opi=89978449). If you require more detailed instructions or an alternative format, the original NHMRC template, or another template, may be more suitable.  When using this template:   * If more than one Participant Information Sheet or Consent Form is required for your research project, make sure that the forms are clearly distinguishable between the different groups (e.g. ‘Parent/guardian consent form’ and ‘Participant consent form’). * When editing the form for your research project, delete any headings and sections that are not relevant to your research project and/or modify paragraphs so that they are relevant to your research project. * If Participant Information Sheet/Consent Forms are being produced in more than one language, please check with the relevant HREC administration in case additional requirements apply. * Use [Easy English and Plain English](https://centreforinclusivedesign.org.au/wp-content/uploads/2020/04/Easy-English-vs-Plain-English_accessible.pdf) principles as relevant to your participant cohort. Ensure the content is accessible for screen readers.   Delete this page and all instructional font (in grey) prior to finalising for use. |

# **Participant information and consent form ─** [Differentiate for participant group if applicable]

### Title: [Insert research project title]

### Principal Researcher: [Insert name and role of primary researcher]

### Co-researchers: [Insert names and roles of additional researchers/delete if not required]

### Research Body: [Insert name of organisation/s responsible for the research project]

1. Introduction

Thank you for your interest in participating in this research project. This document will give you important information about the project, to help you decide if you would like to take part in the research.

Please read the following information carefully. If you need this information in another language or format, please let us know. Please ask questions if there is anything that you don’t understand or want to know more about.

1. What is this research about?

[Briefly describe what the project aims to achieve and why this is significant (e.g. providing new or timely information)]

This research has been funded by [insert the grant name and funding body]. The research is being conducted by [insert the name/s of the organisation/s conducting the research].

1. What will I be asked to do if I participate?

[Briefly and clearly explain the following]:

* Whether and how any screening processes will operate.
* If randomisation and/or a control group will be used.
* What research activities participants will be asked to complete (e.g. surveys, interviews, focus group discussions) and how long it will take.
* What data will be collected and how it will be recorded (e.g. an online platform, audio recording). If personal and/or sensitive information is being collected, clearly explain this. If the participant can choose whether or how they provide certain information, make this clear.

1. What are the possible benefits of participating?

We cannot guarantee or promise that you will receive any benefits from this research; however, possible benefits may include [describe any likely benefits to participants or other people in the future. If participants will receive any compensation for their time, provide details].

1. What are the possible risks of participating?

[Explain the severity and likelihood of risks, e.g. ‘There are minimal risks to participating in this research. You might experience discomfort or embarrassment at some of the questions, however you can skip any questions that you don’t want to answer, or stop the survey/interview at any time’.

Include details of relevant support/counselling services that the participant can access free of charge.]

[If there are group activities, include the following]: We will take care to maintain privacy and confidentiality in group discussions and will ask participants not to share anything that is said outside of the group. However, we cannot guarantee that all group members will keep these discussions confidential. There is a risk that you may experience discomfort or embarrassment if one of the group members repeated things that were said in a confidential group meeting.

1. What will happen to my information?

By signing the consent form, you consent to the research team collecting and using personal information about you for the research project. Any information that can identify you will be treated as confidential and securely stored [explain where it will be kept and who will have access to it]. Your information will only be used for the purpose of this research project and related future research projects [describe ‘related future research projects’ if relevant or delete] and it will only be disclosed with your permission, except as required by law.

Any personally identifiable information (for example, your name or email address) will be stored separately from the [e.g. survey responses/interview transcripts]. The [e.g. survey responses/interview transcripts] will be stored [explain where and for how long the data will be stored, ensuring you are complying with minimum/maximum limits under law and organisational policies].

[If it is likely that additional information relating to participants will be sought from their administrative records, include the following:]

Information about you may be obtained from your records held at [name all organisations from which administrative data may be obtained] for the purpose of this research. By signing the consent form, you agree to the research team accessing these records if they are relevant to your participation in this research project.

[If you plan to publish the results or findings, include the following:]

We expect to [publish/present] the results of this research project when it is complete. In any publication and/or presentation, we will [describe the steps you will take to ensure confidentiality], unless you give us permission to identify you.

1. Will I find out the results?

[Provide details of how the participants will be able to access the findings or results, and whether they will be notified when the results are published/available. If participants will have the opportunity to access and/or contribute to draft findings, describe how this will work.]

Under Australian and Victorian privacy and related laws, you have the right to request access to the information about you that is collected and stored by the research team. If you disagree with any of this information, you also have the right to request corrections. Please inform the research team member named at the end of this document if you would like to access your information.

1. Do I have to take part?

Participation in any research project is voluntary. If you do not wish to take part, you do not have to. If you decide to take part and later change your mind, you are free to withdraw from the project at any time.

If you decide to withdraw from the research project, the researchers will not collect additional personal information from you, although personal information already collected will be retained to ensure that the results of the research project can be measured properly and to comply with law. Any data collected up to the time you withdraw will form part of the research project results. If you do not want your data to be included, you must tell the researchers when you withdraw from the research project.

If you do decide to take part, you will be given this Participant Information and Consent Form to sign and you will be given a copy to keep.

Your decision whether to take part or not to take part, or to take part and then withdraw, will not affect your service, your relationship with professional staff or your relationship with [insert organisation name].

1. How can I get more information?

If you want any further information about this project or if you have any problems that might impact your involvement in the project, you can contact the researcher [name and contact information] or any of the following people:

[List the names and contact details of other appropriate persons involved in the project including other researchers and coordinators].

1. Who can I contact if I have a complaint or concern about the project?

If you have any complaints about any aspect of this project, how it is being conducted, or anyone who is involved in the project, you can contact:

[Provide the name and contact details of a person independent of the research, such as the Executive Officer of the reviewing ethics committee that approved the project.]

If you suffer any distress or psychological injury as a result of this research project, you should contact the research team as soon as possible. You will be assisted with arranging appropriate treatment and support.

The ethical aspects of this research project have been approved by the [name of ethics committee, institution].

# Consent form **─** [Differentiate for participant group if applicable]

### Title: [Insert research project title]

### Principal Researcher: [Insert name and role of primary researcher]

### Co-researchers: [Insert names and roles of additional researchers/delete if not required]

### Research Body: [Insert name of organisation/s responsible for the research project]

**Participant declaration**

I have read the Participant Information Sheet, or someone has read it to me in a language that I understand.

I understand the purposes, procedures and risks of the research described in the project.

I have had an opportunity to ask questions, and I am satisfied with the answers I have received.

I freely agree to participate in this research project as described and understand that I am free to withdraw at any time during the project without affecting my access to services.

I understand that I will be given a signed copy of this document to keep.

Name of Participant (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Declaration by Researcher

I have given a verbal explanation of the research project, its methods, benefits and risks and I believe that the participant has understood that explanation.

Name of Researcher (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_