



# INFORMED CONSENT FORM (TEMPLATE)

*GenUrb Research Training Modules*

**Date:**

**Study Name:**

**Researcher name:**

- Your name, your institution, the principal investigator or lead researcher in your project.
- Include your contact details, including email address and/or relevant phone number.

**Purpose of the Research:**

- A statement about the purpose of the research in plain language that will be accessible to your research subject.
- A statement indicating how the research will be conducted (i.e., your methodology), presented and reported (e.g., class presentation, thesis or dissertation, article, conference presentation, report, etc.).

**What You Will Be Asked to Do in the Research:**

- A statement regarding the role and/or responsibilities of the research participants.
- If participants are asked to be involved in more than one data collection method (e.g., an interview and survey), list each method of participation.
- Include a statement regarding the estimated time commitment for the participant.
- If inducements will be offered, indicate them here.

**Risks and Discomforts:**

- Provide a description of any real or perceived risks (physical, emotional, economic, social) or potential discomfort that may result from participation in the research.
- If there is a possibility of harm or discomfort it must be described and the mitigation methods must be indicated.
- If there are no foreseeable and/or known risks then the following statement should be included: We do not foresee any risks or discomfort from your participation in the research.

**Benefits of the Research and Benefits to You:**

- Include a statement regarding any benefits of the research as well as benefits to the research participants.

**Voluntary Participation and Withdrawal:** **[Include this statement]** Your participation in the study is completely voluntary and you may choose to stop participating at any time. Your decision not to volunteer, to stop participating, or to refuse to answer particular questions will not influence the nature of the ongoing relationship you may have with the researchers or study staff, or the nature of your relationship with York University either now, or in the future.

**[If you are offering inducements, include the following]** If you decide to stop participating, you may withdraw without penalty, financial or otherwise, and you will still receive the promised inducement.

In the event you withdraw from the study, all associated data collected will be immediately destroyed wherever possible. Should you wish to withdraw after the study, you will have the option to also withdraw your data up until the analysis is complete.

#### **Confidentiality:**

**Include statement on:**

- **Your methods of documentation**
  - **Secure storage of data**
  - **Length of storage of data**
  - **Policy for archival of data and future use**
- Unless you choose otherwise, all information you supply during the research will be held in confidence and unless you specifically indicate your consent, your name will not appear in any report or publication of the research.
- **[Indicate how the data will be collected, e.g., handwritten notes, video/audio tapes, digital device.]** Your data will be safely stored in a locked facility **[or indicate how the (electronic and hard copy) data will be securely stored]** and only the researcher **[or include any other research staff/research team members]** will have access to this information.
- **[Include this statement]** Confidentiality will be provided to the fullest extent possible by law.
- **[If you intend to use the data for future research purposes, the following text should be included:]** The data collected in this research project may be used – in an anonymized form – by members of the research team in subsequent research investigations exploring similar lines of inquiry. Any secondary use of anonymized data by the research team will be treated with the same degree of confidentiality and anonymity as in the original research project.

**Questions About the Research?** If you have questions about the research in general or

about your role in the study, please feel free to contact me at <<insert your e-mail address>> or my supervisor, <<Insert name of supervisor>> at <<insert supervisor's e-mail address>> and/or <<insert supervisor's telephone number>>.

**[Modify with relevant details of your research institution]** This research has received ethics review and approval by the Delegated Ethics Review Committee, which is delegated authority to review research ethics protocols by the Human Participants Review Sub-Committee, York University's Ethics Review Board, and conforms to the standards of the Canadian Tri-Council Research Ethics guidelines. If you have any questions about this process, or about your rights as a participant in the study, please contact the Sr. Manager & Policy Advisor for the Office of Research Ethics, 5th Floor, Kaneff Tower, York University (telephone 416-736-5914 or e-mail ore@yorku.ca).

### Consent Form

[Participant to indicate consent by filling out form, or in the case of verbal consent researcher to indicate that relevant matters have been explained in full to the participant, and understood by the participant, and verbal consent has been obtained]

- I have read and understood the project information sheet
- I have been given the opportunity to ask questions about the project

I agree to participate in the project, and consent for interviews with me to be:

- Audio recorded
- Video recorded

I understand that my participation is voluntary and I can withdraw from the study at any time.

I \_\_\_\_\_ <<insert participants name>> consent to the use of images of me (including photographs, video and other moving images), my environment and property in the following ways (please check all that apply):

In academic articles	[ ] Yes	[ ] No
In print, digital and slide form	[ ] Yes	[ ] No
In academic presentations	[ ] Yes	[ ] No
In media	[ ] Yes	[ ] No
In thesis materials	[ ] Yes	[ ] No

I understand that my personal details, such as phone number and address, will not be revealed to people outside the project.

I understand that my words may be quoted in publications, reports, web pages, and other research outputs, but my name will not be used unless I've consented to it above.

I agree for my data to be archived in a secure research database and other researchers will have access to this data only if they agree to preserve the confidentiality of that data and if they agree to the terms I have consented to in this form.

(If offering consent to waive anonymity):

I [insert participant's name], consent to the use of my name in the publications arising

ing from this research.

I do not want my name used in this project

[Name of Participant]

[Signature]

[Date]

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[Name of Researcher]

[Signature]

[Date]

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