**[Project Title]**

*[Note: Your assent form should reflect the appropriate decision-making skill level of the minors involved in your research. This may require you to create more than one form.]*

**[*Purpose*]**

You are being asked to be in a research study. A research study is a special way to find out about something. Your parent/guardian knows about the study, but you can decide if you want to be in it or not.

*[You must state that you are engaging in research. How you describe what a research study is will depend on the cognitive level of your participants.]*

If you decide to participate in the study, you will be asked to participate in a brief exercise prior to taking the class test. The exercise will last for about 3-5 minutes before you begin the test. After the teacher has graded the tests, unidentified grades will be given to the researcher to look at. The researcher will receive the scores without your name, so he will have no way of knowing how you as a student scored.

*[You must provide a description of the study’s purpose and procedures.]*

**[*Risks*/*Discomforts*]**

Some things may make you uncomfortable, such as not being able to take the test right away or having the test grade seen by someone else. The risk in this study is not greater than that experienced in normal daily activities.

*[This section is required and should be written so that the child can decide whether they want to take the risk or experience the possible discomfort.]*

**[*Benefits*]**

The researcher hopes this study will help you get a better grade on the test, as you may be more calm and relaxed while taking the test. The researcher also hopes to share any benefits that may happen with other classrooms, so that other students can be helped as well. We also hope to learn something that will help other people some day.

*[This section must include a description of any benefits expected for the participants or for society.]*

**[Confidentiality]**

When we are done with the study, we will write a report about what we found out. Other people will not know if you are in my study. I will put things I learn about you together with things I learn about other children, so no one can tell what things came from you. When I tell other people about my research, I will not use your name, so no one can tell who I am talking about.

*[This section is required and should describe the extent to which confidentiality of records identifying the participant will be maintained. Again, this should be appropriate to the cognitive level of your participants. ]*

**[*Participant* *Rights*]**

If you want to stop, that’s OK and nobody will be angry or disappointed. You do not have to participate in this study and can quit the study at any time.

*[This section is mandatory.]*

***[Questions]***

If you have any questions about the study please contact the school psychology intern and program leader, Mary Jones at (309) 555-1234 or Jones@educationnet.net. You may also contact John Doe the school psychologist at (309) 555-1222.

This project has been reviewed and approved by the WIU Institutional Review Board. Questions concerning your rights as a participant in this research may be directed to Jacqueline Tharpe, Compliance Specialist, at (309) 298-1191 or IRB@wiu.edu.

*[This section is mandatory and must include information about whom the minor can talk to if he/she has questions about the study.]*

If you want to be in the study, please sign on the line below. Remember, you can quit being in the study any time.

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Participant Name (printed)

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Participant Signature Date

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Signature of Person Obtaining Consent Date

*[Before submitting the assent document for IRB review, please delete all of the bracketed instruction language from the document. Assent documents will be returned without review if instruction language is not removed.]*