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|  | Institutional Review Board  Human Research Protections  1 Park Avenue | 6th Floor | New York, NY 10016 |

**NYU Langone Health**

**ASSENT FORM**

***PLEASE DELETE ALL INSTRUCTIONS PRIOR TO SUBMITTING YOUR FORM FOR REVIEW***

***ASSENT OF MINOR (AGES 7-11 non-biomedical)***

**Instructions:** *This template uses sample language for Assent Forms.*

*All instructional information is in red italics. This template also includes examples of language in which you may model your form on. The examples are in pink italic font. You must remember to delete the red and pink sections before submitting to the IRB.*

*When developing your assent form you may want to use a larger font size. Certain fonts and font sizes are more appropriate for younger aged children. This form uses Comic Sans 12 point.*

*If possible, the form should be limited to a few pages. Illustrations may be used instead of words if appropriate to assist in the child’s comprehension.*

*As all consent/assent processes, the information in this form must be presented orally do not rely on the child’s ability to read this form. In some cases, it may be appropriate for the child to provide an oral assent. If you encounter a child that can only provide oral assent, you must advise the IRB.*

**Why we would like to speak with you**

We want to talk to you about something we are doing called a research study. A research study is when someone collects a lot of information to learn more about something. Doctors who do research are also called researchers.

If you have any questions during our talk about this study, you can ask them. Don’t worry about waiting until the person talking stops speaking, you can stop them at any time and ask your question.

We are doing a research study to learn more about children with [insert disease/disorder type]. After we tell you about this research study, we will then ask you if you’d like to be in this research study or not.

If you decide to be in this research study, you will be given a copy of this form that you have signed to take home.

It’s okay to say 'NO' if you don't want to be in the study. It is also okay to quit being in the study at any time.

***Why are we doing this study?***

If you agree to be in our study, [*insert information on why the study is being completed and why the child is being invited to participate…[Example language] W*e are going to ask you some questions about different types of people. We want to know if you think some people usually tell the truth or if they usually lie. For example, we will ask you if a teacher, parent, or other people usually lie or usually tell the truth. We will be asking other kids just like you. We will collect all the answers and see if we can learn about who you think may tell the truth and who may lie. The questions we will ask are only about what you think. There is no right or wrong answer. This is not a test.

We will be getting information from lots of boys and girls like you. In this research study, there will be about \_\_\_\_ children who have \_\_\_\_\_\_\_\_\_\_\_. You will have to come back to the office ------ [insert # of visit or revise accordingly to indicate what is required of the child in terms of time].

***What will happen to you if you are in the research study****?* [*Describe what will take place from the child’s point of view*] Only if you agree to be in the study, the following things will happen:

*[Example language]*

1. you will be asked to answer some questions. The questions will be written on paper and you will be asked to write your answers. But, remember this is not a test.
2. Once you finish answering the questions, the researchers will ask you some more questions.

This study should take no more than 25 minutes of your time.

**Are there any bad things that can happen to you if you are in this research study?**

**We do not think** [insert **anything bad will happen to you in this research study but there is a chance that someone other than the study doctors and nurses and your parents can find out that you are in this study. In other words, there is a chance that someone could find out your answers to the questions we ask you. OR STATE: There are some things that could happen to you in this research study, these things are:**]. If appropriate list the most likely risk using a bullet format. ]

***Do you have to be in this study?***

No, and no one will be mad at you if you don’t want to. If you don’t want to be in this study, just tell us. If you want to be in the research study, tell us that. And, remember, you can say yes now and change your mind later. It’s up to you.

Please talk this over with your parents before you decide whether or not to be in the research study. Your parents have said that it is okay with them if you want to be in the research study. Even though your parents have said it is okay with them, you can still say 'No'.

***What if you have questions?***

You may ask questions at any time. You can ask now or later. You may talk to the doctor or someone else. Your parents have the information on who you or they may call after you go home.

***What about your privacy?***

The study doctor will talk about the study with your parent/guardian, but will not talk about it with anyone else except the people working on the study. If the study doctor needs to talk to anyone else about you he/she will ask you and your parent/guardian if it is OK.

**Saying Yes or No to being in this study:**

You can say yes or no. If you say yes, we want to remind you:

1. You can stop being in the study any time you want to.

2. You can call the study doctor any time you have any questions.

3. Besides your parents/guardian your information will only be shared with the doctor and nurses in this study.

If you want to be in this study, tell us that. And, remember, you can say yes now and change your mind later. It’s up to you.

If you sign this paper, it means that you have read this, you have talked with someone about the research study, you have had all your questions answered and you want to be in the study.

If you don’t want to be in the study, don’t sign this paper. Being in the study is up to you, and no one will be upset if you don’t sign this paper or if you change your mind later.

*Signature of Child Date*

I have solicited the assent of the child.

Signature of Person Obtaining Assent/Consent Date