**Sample Child Assent Form\***

**School Name**

I, [Student Name], have been asked to take part in a research study about [purpose of study]. The study was explained to me by [researcher name], a [researcher affiliation (e.g. teacher at x school)].

I understand that I will [participant involvement, e.g. complete a survey] that will take me about [time involved]. I will face minimal risks by taking part in the study [or specify risks]. My participation is voluntary, and I can change my mind at any time without any penalty [explain what the penalty could be, e.g. affecting one’s grade, or affecting one’s ability to participate in an activity]. About \_\_\_\_\_ students will take part in the study.

The person conducting the study will not reveal my name to anyone, and my name will not appear in any reports on the study.

I was informed that if I have questions, I can call [your name] at [your phone number]. If I have questions about my rights as a participant, I can call [current IRB chair] at [current IRB chair phone number] or email [current IRB chair email]. After I sign the form, I will receive a copy of it.

I am willing to take part in this study. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature

I am willing to have my voice recorded on a recorder device. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature

\*Please note that this is only a sample template for child assent. Depending upon the particular research being conducted, the age of the participants, and other factors, additional information or language may need to be added or revised.