

INFORMED CONSENT
(TITLE of STUDY)

You are invited to participate in a research study which will involve **(STUDY DESCRIPTION)**. Our names are _____ and _____, and we are students at California State University, Sacramento, Psychology Department. The purpose of this research is to **(DESCRIBE PURPOSE)**.

If you decide to participate, you will be asked to **(DESCRIBE PROCEDURES)**. Your participation in this study will last **(DURATION)** and will take place in **(IDENTIFY)**.

You will receive _____ hour(s) of credit toward satisfying the Psychology Department's research participation requirement by participating in this research.

The risks associated with this study are not anticipated to be greater than those risks encountered in daily life. However, this research may involve the following risks.

(Brief description of any potential risks to participants.)

This research may have the following benefits:

(Brief description of direct benefits to participants from their participation and to the CSUS community. Because this class project cannot be disseminated outside of the University you cannot make claims to broader scientific knowledge.)

Your participation in this project is voluntary. You have the right not to participate at all or to leave the study at any time. You may discontinue your participation at any time without any penalty other than loss of research credit. The investigator may discontinue your participation at any time.

(Include the following statement if the research consists of any type of deception.)

Although the researcher may need to avoid a complete description of the procedures at this time, you are entitled to a full explanation after the research. There are some benefits to this research, particularly that **(state benefits to subjects or society, most research does not result in direct benefits to the participant)**.

I do not intend to publish the results of this research, but may present my results at CSUS. You will not be identified in my results. Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission. I will protect your identity by: (1) grouping responses or using pseudonyms, (2) storing collected information in a protected location, and (3) removing identifiers as early as possible. Information that can identify you will be deleted or removed from the data immediately upon collection. The de-identified data will be kept in a secure location. I will destroy the de-identified data no more than three-years after the study ends or when the data is no longer needed.

If you have any questions about the research at any time, please contact me at **(YOUR INFO or Advisor name & contact info)**. If you have any questions about your rights as a participant in a research project please call the Office of Research Affairs, California State University, Sacramento, (916) 278-5674, or email irb@csus.edu

Understand that your responses will be kept confidential to the degree permitted by the technology used. However, no absolute guarantees can be given for the confidentiality of electronic data. Understand that the researcher will be unable to completely remove anonymous data from cloud-based servers should you wish to withdraw from the study.

Your participation in this study indicates that you have read and understand the information provided above.

Online studies should include “I agree” and “I do not agree” buttons for participants to click their choice of whether or not they consent to participate in the study.