\*Please revise or remove language in RED

Informed consent forms should be written in simple language that is understandable at an 8th grade reading level (Use the Flesch-Kincaid function in WORD to determine reading level). You can copy and paste the paragraph below into REDCAP on the first page of the survey.

**ALTERATION OF INFORMED CONSENT TO PARTICIPATE IN RESEARCH**

Title of study

You are being asked to be in a research study. You are being asked to do the study because [ ]. Doing this study is your choice. You can decide not to do this study. If you decide to do this study, you can then choose to stop the study at any time, for any reason.

KEY INFO

• **Study Purpose:** The purpose of the study is [ ]

• **Major parts of the Study**: You will be asked to [ ]

• **Risks:** The primary risk of doing the study is [ ]

• **Potential Benefits:** The potential benefits are [ ]

• **How Much Time Will the Study Take:** We ask you to do the study for [ ]

• **Consent:** Consent is being sought for this study. Doing the study is voluntary.

• **Funding:** [ ] is funding this study.

Ask Principal Investigator (PI) [ ] to explain any words, or details that you do not understand. Questions regarding the purpose or procedures of the research should be directed to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_(name) at \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Phone number/email).

You are free to choose to participate or not to participate. If you choose not to participate you will not be penalized. There is no cost to participate. There is no compensation for participation.

The data will be collected anonymously. Due to the anonymous design, you will not be able to exit and re-enter the survey. Your responses will be confidential. The study data will be stored in a secure location. You may stop being in the study at any time, except after you submit a survey response. Due to the anonymous design, it will not be possible to identify your responses in order to remove them from the data set.

The PNWU Institutional Review Board (IRB) protects the interests of human research participants. The PNWU IRB reviewed this project. If you have concerns or questions about your rights as a research participant, you may contact the IRB Administration at 509-249-7852 or [research@pnwu.edu](file://com.pnwu.org/pnwu/pnwudata/Committees/PNWU%20IRB/Forms-PNWU%20IRB/Forms_Current/2018%20Archives/research%40pnwu.edu)

**Do you consent to be in the study?**

 Yes, I consent No, I DO NOT Consent