**Letter of Information / Informed Consent Form**

The Letter of Information / Informed Consent form should be:

1. Written in plain, clear language avoiding the use of jargon and acronyms.
2. Tailored to the reading level of the participants so they can understand what is required of them and make an informed decision about their participation.
3. Presented on this template.

Participants should be given a copy of the letter of information / signed consent form or advised to retain a copy for their own records.

Researcher(s) should retain a copy of the signed consent form in their records.

This template demonstrates the minimum information that should be included in the consent form. Additional information may be required depending on the nature and complexity of the project.

NOTE: If you are conducting only ananonymous, online survey, there is a specific consent form (Online Anonymous Survey Consent) that is more applicable to that type of study that you can use.

The template begins on the next page.

**Do not** include this instruction page with your form.

Directions for what to include in each section are written in *italicized red text*.

All *italicized red text* should be replaced with information specific to your project.

**LETTER OF INFORMATION / INFORMED CONSENT FORM**

*[Title of Research Project]*

*[Date]*

**Principal Investigator (Researcher):** **Supervisor *(if applicable)*:**

*[insert name and contact info] [insert name and contact info]*

You are invited to take part in a research project entitled ‘*your project title here*’.

This form is part of the process of informed consent. The information presented should give you the basic idea of what this research is about and what your participation will involve, should you choose to participate. It also describes your right to withdraw from the project. In order to decide whether you wish to participate in this research project, you should understand enough about its risks, benefits and what it requires of you to be able to make an informed decision. This is the informed consent process. Take time to read this carefully as it is important that you understand the information given to you. Please contact the principal investigator, *your name here* if you have any questions about the project or would like more information before you consent to participate.

It is entirely up to you whether or not you take part in this research. If you choose not to take part, or if you decide to withdraw from the research once it has started, there will be no negative consequences for you now, or in the future.

**Introduction**

My name is *your name here* and I am a *insert degree program* student at Athabasca University. As a requirement to complete my degree, I am conducting a research project about *briefly describe the project in lay terms 1 – 2 sentences*. I am conducting this project under the supervision of *your supervisor’s name here*.

**Why are you being asked to take part in this research project?**

You are being invited to participate in this project because *describe why this person might qualify for participation in the research project*.

**What is the purpose of this research project?**

*Describe the purpose of the research, including what the project hopes to answer.*

**What will you be asked to do?**

*Describe the nature of the participation, including methods of data collection (e.g. audio or video recorded interview, in-person interview, hard copy or online survey completion, etc.), the expected length of time it will take (provide a realistic estimate of the time, frequency and effort that will be required of the participant) and state where the participation will occur (e.g. “The interview would be arranged for a time and place that is convenient to your schedule”; “You may complete the survey at any time convenient to you between x date and x date”)*.

*State whether any follow-up conversation would be scheduled to review the interview transcript and whether opportunity will be given to participants to alter/clarify their comments.*

**What are the risks and benefits?**

*Describe any potential adverse effects, including physical, psychological, social, economic and spiritual risks. Describe how these adverse effects will be dealt with.*

*Identify any benefits to the participant, for the development of knowledge, or for a change in practice. If an incentive is being offered to participate, or costs to be reimbursed, include a clear statement describing the incentive or reimbursement and the manner in which it will be distributed (e.g. Participants will receive $12.00 reimbursement for their parking costs at the time of the in-person interview; Participants will receive a $20 gift card for [state name of company] following the interview as a thank you; Participants will be entered into a draw for a [state the item] to be drawn on [indicate the date of the draw]; Participants who choose to provide their email address at the conclusion of the survey will receive a $15 gift card for [state name of company] as a thank you. State explicitly if there are no direct benefits to the participant.*

**Do you have to take part in this project?**

As stated earlier in this letter, involvement in this project is entirely voluntary. *Describe how participants can stop and/or end their participation during the data collection (e.g. ending an interview partway through; exiting a survey before submitting) and what will be done with any data collected up to that point.*

*Discuss any consequences that withdrawal may have on the participant (e.g. if incentives have been offered).*

*Include one (1) of the following regarding data removal, as applicable to your project:*

* ***If data can be removed*** *from the project after participation has ended (e.g. by removing an interview transcript several months after it was recorded), specify a cut-off date up to which this is possible. OR*
* ***If data cannot be removed****, state this explicitly and give the reasons why (e.g. data will be anonymized (or is anonymous) and cannot be removed).*

**How will your privacy and confidentiality be protected?**

The ethical duty of confidentiality includes safeguarding participants’ identities, personal information, and data from unauthorized access, use or disclosure.

* *Include a statement about how participants’ privacy and confidentiality will be maintained. If confidentiality cannot be guaranteed (e.g. participants may be identifiable due to specific characteristics in the sample population), specify the limits to confidentiality.*
* *Describe any other limitations to confidentiality that may be applicable [if there is a likelihood that reportable information may arise during the research project (e.g. protected populations, revelation of illegal or heinous act), include a specific statement to address this. “All information will be held confidential, except when legislation or a professional code of conduct requires that it be reported.”*

**How will my anonymity be protected?**

Anonymity refers to protecting participants’ identifying characteristics, such as name or description of physical appearance.

*There is a difference between anonymous participation and anonymous data. For example, participants’ anonymity cannot be guaranteed if data is collected in a group setting, but the data obtained from that participation can be reported without identifiers.*

*Limits to anonymity, of participation and/or data, should be explained.*

*In some cases, some participants may not wish to be anonymous, (e.g. in community-based or participatory research), and this option should be given as long as it does not negatively affect and/or identify other participants who do wish to remain anonymous.*

*If anonymity is desired, researchers should assure participants that* Every reasonable effort will be made to ensure your anonymity; you will not be identified in publications without your explicit permission.

**How will the data collected be stored?**

* *Indicate how data will be stored, whether it will be disposed of and if so, how and when*
* *Indicate whether you intend to deposit data into some form of data repository (with participant’s consent) and if so, what the requirements for access to that data will be. Also describe to what degree the data will be anonymized before deposit and what restrictions are placed on reuse.*
* *Identify all individuals/agencies who will have access to data from the research project, or the report, now or in the future (e.g. supervisor(s); organization(s);*
* *Describe the procedures/methods that will be employed to protect confidential data in all its forms (e.g. password protections and encryption on electronic data; use of pseudonyms (false names) or data codes; locked filing cabinets for hard copy data)*

***If you intend to use/store/deposit the data for your future research purposes****, adapt one of the following statements as applicable:*

The *identifiable / anonymized* data collected in this research project may be [used by members of the research team in subsequent research studies exploring similar lines of inquiry] OR [deposited in a research repository (name the repository if known) for use by researchers doing similar research], with your consent. Such projects will undergo ethics review and any secondary use of *identifiable /* anonymized data will be treated with the same degree of confidentiality and anonymity as in the original research project.

OR

The *anonymous* data collected in this research project may be [used by members of the research team in subsequent research studies exploring similar lines of inquiry] OR [deposited in a research repository (name the repository if known) for use by researchers doing similar research], with your consent.

***[If you intend to use Online surveys****: Note that online surveys (Qualtrix, Survey Monkey etc.) may allow researchers to capture and access additional information about each respondent over and above what they provide in the online survey. In addition, when researchers use the internet to transmit or receive participant data, they should be aware that while in transmission, data may be subject to access by third parties as a result of various security legislation now in place in many countries Therefore, when a researcher is using one of these online survey systems the following statement should be added to the consent form:*

The researcher(s) acknowledge that the host of the online survey *(insert Platform name)* may automatically collect participant data without their knowledge (i.e., IP addresses.) Although this information may be provided or made accessible to the researchers, it will not be used or saved without participant’s consent on the researcher(s) system. Further, “Because this project employs e-based collection techniques, data may be subject to access by third parties as a result of various security legislation now in place in many countries and thus *the confidentiality and privacy of data cannot be guaranteed during web-based transmission.*

***If you intend to use a video/audio conferencing software such as Zoom/ Webex/ Skype/ MsTeams: the following (or similar statements) should be included:***

This study will use the *(insert platform name)* to collect data, which is an externally hosted cloud-based service. When information is transmitted over the internet privacy cannot be guaranteed. There is always a risk your responses may be intercepted by a third party (e.g., government agencies, hackers).   Further, while the researcher(s) will not collect or use IP address or other information which could link your participation to your computer or electronic devices without informing you, there is a small risk with any platform such as this of data that is collected on external servers falling outside the control of the research team. If you are concerned about this, we would be happy to make alternative arrangements (where possible) for you to participate, perhaps via telephone.  Please contact *XXX* for further information.

Recordings (audio/video) will be saved in a password protected file to research team members’ local computer, not the cloud-based service*. [if this is possible]*

Please note that it is the expectation that participants agree not to make any unauthorized recordings of the content of a meeting / data collection session.

**Who will receive the results of the research project?**

*Describe how and where results of the research project will be disseminated and whether or how they will be made available to interested participants.*

* *If you are an AU graduate program student and the research is a final research project or thesis, include the following statement:* The existence of the research will be listed in an abstract posted online at the Athabasca University Library’s Digital Thesis and Project Room and the final research paper will be publicly available.
* *Be sure to comment on whether direct quotations or personally identifying information (with permission only) will be reported; or whether reporting is only in aggregate or summarized form.*
* *Be sure to highlight whether audio/video recordings will be used in dissemination of the research.*
* *State what information or feedback on the research project will be available or provided to participants after the project is complete (e.g. report, executive summary, poster presentation). Indicate how/if participants can access the project results without having to contact the principal investigator (e.g. available on researcher’s website).*

**Who can you contact for more information or to indicate your interest in participating in the research project?**

Thank you for considering this invitation. If you have any questions or would like more information, please contact me (the principal investigator) by e-mail *insert e-mail address* or *insert any other means of contact you wish to use* or my supervisor by *insert e-mail address or phone number.* If you are ready to participate in this project, *please complete and sign the attached Consent Form and return it by* [*provide directions on who, where, how and by when]* **OR** *please proceed to review the following consent and complete the survey.*

Thank you.

*[nsert researcher name]*

**This project has been reviewed by the Athabasca University Research Ethics Board. Should you have any comments or concerns about your treatment as a participant, the research, or ethical review processes, please contact the Research Ethics Officer by e-mail at** [**rebsec@athabascau.ca**](mailto:rebsec@athabascau.ca) **or by telephone at 780.213.2033.**

***The remainder of your form should include ONE of the sections below:***

***Option 1*** *– for signed consent; OR*

***Option 2*** *– for oral consent*

***OPTION 1- signed consent forms:***

**Informed Consent:**

**Your signature on this form means that:**

* You have read the information about the research project.
* You have been able to ask questions about this project.
* You are satisfied with the answers to any questions you may have had.
* You understand what the research project is about and what you will be asked to do.
* You understand that you are free to withdraw your participation in the research project without having to give a reason, and that doing so will not affect you now, or in the future.

*Only include the points from the following that are applicable to your project.*

* You understand that if you choose to end your participation **during** data collection, any data collected from you up to that point will be *Choose one of the following to complete the bullet point, as applicable:*

destroyed.

retained by the researcher, unless you indicate otherwise.

*Choose one of the following, as applicable to your project:*

* You understand that if you choose to withdraw **after** data collection has ended, your data can be removed from the project at your request, up to *insert cut-off date here.*
* You understand that your data is being collected anonymously and therefore cannot be removed once the data collection has ended.

***Include only the checkboxes that are relevant to your project****:*

*These are some common examples, not an exhaustive list. If you require consent for something not listed, insert more rows/checkboxes as required.*

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| I agree to be audio-recorded | ⃝ | ⃝ |
| I agree to be video-recorded | ⃝ | ⃝ |
| I agree to be photographed | ⃝ | ⃝ |
| I agree to the use of direct quotations | ⃝ | ⃝ |
| I agree to the use of audio recordings in dissemination | ⃝ | ⃝ |
| I agree to the use of video recordings in dissemination | ⃝ | ⃝ |
| I allow my name to be identified in any publications resulting from this project | ⃝ | ⃝ |
| I allow **de-identified or anonymous data** collected from me to be deposited into *insert name/description of the research data archive/ repository here* | ⃝ | ⃝ |
| I allow **identifiable data** collected from me to be deposited in *insert name/description of the research data archive/repository here* | ⃝ | ⃝ |
| I am willing to be contacted following the interview to verify that my comments are accurately reflected in the transcript. | ⃝ | ⃝ |
| I allow **de-identified or anonymous data** collected from me to be retained by the members of the research team for use in future research exploring similar lines of inquiry. | ⃝ | ⃝ |
| I allow **identifiable data** collected from me to be retained by the members of the research team for use in future research exploring similar lines of inquiry. | ⃝ | ⃝ |
|  |  |  |

**Your signature confirms**:

* You have read what this research project is about and understood the risks and benefits. You have had time to think about participating in the project and had the opportunity to ask questions and have those questions answered to your satisfaction.
* You understand that participating in the project is entirely voluntary and that you may end your participation at any time without any penalty or negative consequences.
* You have been given a copy of this Informed Consent form for your records; and
* You agree to participate in this research project.

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Signature of Participant Date

Principal Investigator’s Signature:

I have explained this project to the best of my ability. I invited questions and responded to any that were asked. I believe that the participant fully understands what is involved in participating in the research project, any potential risks and that they have freely chosen to participate.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Principal Investigator Date

***OPTION 2- For oral consent forms:***

**Informed Consent:**

**Your verbal consent confirms**:

* You have read what this research project is about and understood the risks and benefits. You have had time to think about participating in the project and had the opportunity to ask questions and have those questions answered to your satisfaction.
* You understand that participating in the project is entirely voluntary and that you may end your participation at any time without any penalty or negative consequences.
* You have been given a copy of this Informed Consent form for your records; and
* You agree to participate in this research project.

*Only include the points from the following that are applicable to your project.*

* You understand that if you choose to end your participation **during** data collection, any data collected from you up to that point will be *Choose one of the following to complete the bullet point, as applicable:*

destroyed.

retained by the researcher, unless you indicate otherwise.

*Choose one of the following, as applicable to your project:*

* You understand that if you choose to withdraw **after** data collection has ended, your data can be removed from the project at your request, up to *insert cut-off date here.*

***Include only the checkboxes that are relevant to your project****:*

*These are some common examples, not an exhaustive list. If you require consent for something not listed, insert more rows/checkboxes as required.*

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| I agree to be audio-recorded | ⃝ | ⃝ |
| I agree to be video-recorded | ⃝ | ⃝ |
| I agree to be photographed | ⃝ | ⃝ |
| I agree to the use of direct quotations | ⃝ | ⃝ |
| I agree to the use of audio recordings in dissemination | ⃝ | ⃝ |
| I agree to the use of video recordings in dissemination | ⃝ | ⃝ |
| I allow my name to be identified in any publications resulting from this project | ⃝ | ⃝ |
| I allow **de-identified or anonymous data** collected from me to be archived/deposited in *insert name/description of archive/repository here* | ⃝ | ⃝ |
| I allow **identifiable data** collected from me to be archived/deposited in *insert name/description of archive/repository here* | ⃝ | ⃝ |
| I am willing to be contacted following the interview to verify that my comments are accurately reflected in the transcript. | ⃝ | ⃝ |
| I allow **de-identified or anonymous data** collected from me to be retained by the members of the research team for use in future research exploring similar lines of inquiry. | ⃝ | ⃝ |
| I allow **identifiable data** collected from me to be retained by the members of the research team for use in future research exploring similar lines of inquiry. | ⃝ | ⃝ |
|  |  |  |

Please retain a copy of this consent information for your records.