

Approval of Low Risk Projects involving Human Participation (e.g., surveys of attitudes, beliefs or skill tests)		
Student Name (1): Address: Phone: Email:	Student Name (2): Address: Phone: Email:	
School, City:		
Project Title:		
Purpose of this Research		
Prior to consent and assent being granted, the parents or guardians and the participants have had the opportunity to ask questions about the project, and any concerns have been addressed.	Yes	No
The Parents of the participants have given their consent.	Yes	No
The Participants have given their assent.	Yes	No
The Participants understand that they are free to withdraw at any time.	Yes	No
The Participants will be given the results of the project.	Yes	No
The confidentiality of data. The results of this research will be given with all information about individual participants removed. No personal information will be stored on a computer. All information on paper that could be use to identify individuals will be shredded at the end of the research project.		
Declaration of the Adult Supervisor I am familiar with the ethical issues that are involved with involving Human Participation in low-risk procedures such as surveys of attitudes and beliefs or skill tests. I confirm that this research satisfies the rules that govern such projects		
Name _____ Telephone _____		
Address _____		
Email _____		
Date _____ Signature _____		