

## Science Project Informed Consent Form

You are invited to take part in a research study. Before you decide to be a part of this study, you need to understand the risks and benefits. This consent form provides information about the research study. If you agree to take part in the research study, you will be asked to sign this consent form. This process is known as *Informed Consent*.

**Student Name (1):**  
**Address:**

**Phone:**

**Student Name (2):**  
**Address:**

**Phone:**

**School, City:**

**Project Title:**

**Adult Supervisor:**

Name:

Address:

Phone:

**Purpose of this Research**

**Your benefits from participating.**

**Your risks from participating.**

**Your time commitment**

**Your remuneration**

**The confidentiality of your 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 used to identify individuals will be shredded at the end of the research project.

**Withdrawal**

Your participation is voluntary, and you have the right to withdraw at any time for any reason. If you wish to do so, please send a message to the Adult Supervisor.

**Review**

This project has been reviewed by the Ethics Committee of the \_\_\_\_\_  
Regional Science Fair, and has received their permission to proceed.

**Feedback.** The results of this research will be provided to you in the following way:

**By signing below, you are agreeing to participate in this study.**

**Name** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**If this participant is under the age of 18, permission of a parent or guardian is also required:**

I give permission for the person named above to participate in this study

**Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Date** \_\_\_\_\_