

(Department Name)

University of the Fraser Valley

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Date

(Insert Title of Project) **Letter of Informed Consent**

**Green text is instructional, providing information to the consent form writer. It should be deleted when writing the consent form. Please ensure that information here is consistent with what is in the ethics application.**

**Purpose/Objectives of the Study**

Introduce yourself as the Principal Investigator and what department you are from. Introduce your supervisor and department if applicable. Provide a short description about why you are doing this study and what the study is designed to establish. State this in lay language and personal. [e.g. In this study we want to… We are hoping to learn…] Add information about the research team – who is doing what, why, how, who is involved, etc. If the study is being funded, please state the funder here. **\*\***If you are being financially compensated for the research, please state this, but that the compensation does not depend on specific results. Compensation does not include being released from a course.

**Procedures involved in the Research**

Include a description of what will happen during the study. Describe the procedure in simple language and, if scientific terms are to be used, define them. Be sure to include length of time of participation, assignment to groups, frequency of procedures, and location if applicable. If you are conducting interviews, describe here and include information on the process by which they are recorded (paper, audio, phone, zoom, video, etc.) and what will happen to that information or if there will be a transcript they can review. [e.g. You will be shown… You might be asked to… We will be asking questions about… You will be assigned to… You will have one week to review the transcript…]

**Potential Benefits**

Describe the potential benefits for participating in this study including benefits to the participant’s community, the research community, and/or society. If there are benefits to the participants such as compensation, state this here, and state what that compensation is. If the compensation includes a draw, please state the odds of winning. If there are no benefits to the participant directly, state this as well. [e.g. We hope to… This could help with… The research will not benefit you directly…] **Please note:** if you are giving a gift card or cash/honorarium with university held funds, it is considered a taxable benefit and contact information plus a confirmation of receipt of gift must be given to finance for audit purposes. Honorariums will also require you to collect the SIN of the participant (note Indigenous participants are not required to give a SIN). This must be on the consent form. You can state “This personal information related to the receipt of the [gift card or honorarium] will also be securely stored for seven years with the UFV finance department for audit purposes.” But this will also apply if it is a different university holding the funds.

**Potential Harms, Risks or Discomforts to Participants**

Describe any negative aspects of the study that might or will happen such as any reasonably foreseeable risks, discomforts, and inconveniences to participants. Include information on how risks will be dealt with, including direct resources if applicable. [e.g. the direct contact information to hotlines or free counselling, or someone trained on site of the exercise program]. If there are risks that may cause the researcher to stop the study to ensure that participants are protected, please describe them. [e.g. You may feel uncomfortable with… You do not need to answer questions that make you uncomfortable…]

It may be possible that there are no anticipated risks. In this case, simply state something like “It is not likely that there will be any harm or discomforts associated with…” or “There are no foreseeable risks involved in this study.”

**Confidentiality**

Describe how the data will be kept confidential and if it is anonymous/anonymized/coded, or identifiable. If the data or participant cannot be guaranteed to be confidential, explain why [e.g. online surveys stored outside of Canada, Facebook, focus groups, small sample size, snowball sampling]. Provide information on the length of time of retention and security of data. [e.g. Anything that you say or do in the study will not be shared with anyone else other than the research team…The anonymized data will be made available to other researchers in a repository… Your privacy will be respected… The information obtained will be kept… The data will be locked away… The information will be destroyed…]. If you are using video conferencing software, state if the servers are in Canada or otherwise (if US, state that this information is subject to the US Patriot Act). If using students in a class, remind them that their participation will not affect their grades and why (especially if you are in a position of power – this needs to be addressed with a third party). Provide the date that the raw data will be destroyed.

**Participation**

Explain here that participation is voluntary and participants may withdraw (up until your defined point of time) without consequences; provide a date or time duration [e.g you may withdraw before submitting the survey… you may withdraw before approval of the transcript… you may withdraw by DATE… you may withdraw until submitted for publication (add DATE)) OR once the survey has been submitted you may not withdraw as the data are anonymous]. Explain the mechanism for withdrawal including who to contact and how to contact them. Also make sure participants know they can refuse to answer some questions but stay in the study (if this is true). If they do withdraw, explain what will happen to their data. [e.g. Your participation in this study is voluntary… In cases of withdrawal, any data you have provided will be destroyed unless you indicate otherwise… If you choose not to participate, this will not affect…, if you withdraw a partially completed survey the results will be deleted/kept].

**Study Results**

Explain where the study results will be disseminated. Indicate here if you wish to provide the results of the study to participants, and/or where participants can go or who to contact to get them.

**Questions**

**CONTACT FOR INFORMATION ABOUT THE STUDY**

Indicate here who participants can contact if they have any questions about the study and include their contact information. This is usually the principal investigator.

**CONTACT FOR CONCERNS**

Include the following sentence: “If you have any concerns regarding your rights or welfare as a participant in this research study, please contact the Ethics Officer at [Research.Ethics@ufv.ca](mailto:Research.Ethics@ufv.ca). and reference ethics file #xxxxx

**Consent Form** – (Guideline Only)

By signing below I agree to participate in this study, titled (insert title). OR

By completing the survey, I agree to participate in this study, titled (insert title).

I have read the information presented in the letter of informed consent for the study being conducted by (insert name[s] and faculty) at the University of the Fraser Valley. I have had the opportunity to ask questions about my involvement in this study and to receive any additional details.

I understand that I have the right to withdraw from the study at any time according to the limits and parameters described in the above consent letter, and that confidentiality and/or anonymity of all results will be preserved with applicable limits as described above. If I have any questions about the study, I should contact (name of principal investigator and his or her professional or student (UFV) contact information.)

If I have any concerns regarding my rights or welfare as a participant in this research study, I can contact the UFV Ethics Officer at 604-557-4011 or [Research.Ethics@ufv.ca](mailto:Research.Ethics@ufv.ca).

Note: If using something like audio or video recording and you have a plan in place for participants to be able to participate without being audio/video recorded, make sure to put a check box here for participants to check that they agree to be audio/video recorded. Otherwise if you only can or want to include those that agree, make the statement “by signing below I agree to be audio/video recorded”.

Name (please print)

Signature

Date

Once signed, you will receive a copy of this consent form.

TIPS:

* Parental consent forms should have a line for the child’s name.
* Consider the age and maturity of your participants and write the consent letter at their level.
* Be realistic about the risks and the diversity of your participant population.
* Only include information that a person needs to make an informed decision.
* Include a copy of the letter of consent with the signature page.
* Please proofread the consent form because this is an important document for study participants that represents UFV. If we notice some typos, we will mention them.