

Parental Consent Form for Minor Research Participants

Study Title: _____

Principal Investigator: _____

Institution: _____

Contact Information: _____

Introduction

Your child is invited to participate in a research study. Participation is voluntary. Please read the following information before granting your consent.

Purpose of the Study

Procedures

Potential Risks and Benefits

Confidentiality

All information collected will be kept confidential and used only for research purposes.

Voluntary Participation

Participation is voluntary. Your child may withdraw from the study at any time without penalty.

Parent/Guardian Consent

Child's Name

Parent/Guardian Name

Relationship to Child



I consent to my child's participation in this study.

Signature of Parent/Guardian

Date

If you have questions about the study, please contact the principal investigator.