

XP Category 5 Informed Consent Template

Use this template if:

1. Your research involves **the analysis of materials originally collected for non-research purposes** (usually Expedited Category 5, sometimes Full Board) **AND**
2. Participants are Adults

Before you start: Read these tips!

1. Customize this template to reflect the specifics of your study.

- **Black text** – It is best to keep all language and formatting, including bolding, unless otherwise noted. If you change, please consult the standards document to be sure you are including all required elements of consent.
- **Blue text identifies consent elements required for ALL studies** and includes guidance on characteristics of that element that researchers should consider. **Replace the blue text with the appropriate words for this required element that apply to your study.**
- **Red text identifies elements required only when applicable to your study.** Not all elements will apply to all studies. **Replace the red text with the appropriate words for this required element that apply to your study.**
- **Green text shows suggested language or examples** related to consent elements in **blue** and **red** text.
- **Highlighted black text** provides instructions.

Color Code Key				
Black	Blue	Red	Green	Highlighted Text
Required Template Text	Required Element of Informed Consent	Required Element when applicable	Suggested Language/Examples	Instruction

2. **For additional guidance and language suggestions**, consult the **Consent Form Standards and Sample Language** document.
3. **Before submitting** the consent document to the IRB:
 - **Remove all red and blue** (instructional) **text; if any suggested language will be retained, change text color to black.**
 - **Remove all highlighting**
 - **Remove this page.**
 - **Failure to do the above** will result in return of your application without review.

Title of Research Project Informed Consent Form

You are invited to be part of a research study being conducted by [name\(s\) of researcher\(s\)](#) at the University of Tennessee, Knoxville. You are being invited because you have participated in the [name of program, class, workshop, etc.](#) Being in this research study is voluntary, and you should only agree if you completely understand the study and want to volunteer to allow your [materials/information/specimens](#) to be used. This form contains information that will help you decide if you want to be part of this research study or not. Please take the time to read it carefully, and if there is anything you don't understand, please ask questions.

Purpose

The purpose of this study is to [state purpose explore/investigate/understand](#) the effectiveness of [name of program/class/workshop/etc that is being studied](#). I/we plan to [state planned uses e.g., publish articles and/or books, etc. and make presentations at conferences](#) to share the results of this research.

Participation

If you choose to participate, I/we will analyze [list anything here that you wish to analyze: records? artifacts? etc.the materials you created during your time in name of program, class, workshop, etc., the pre- and post-surveys you completed to tell us what you thought about it/what you learned, If the list is long, use bullets.](#) Because these are all things that are part of your regular activities in [name of program, class, workshop, etc.](#), being in the research will not require any additional time.

Benefit

You will not receive any direct benefit from allowing your [materials/information/specimens](#) to be used in the research project, but we hope to learn things that will benefit [society/science/teachers/researchers/social workers/ etc](#) in the future.

Risks

This research is considered to be no more than minimal risk, which means there is no more expected risk to you than what you might experience during a typical day. There is the risk of possible loss of confidentiality, as someone could find out you were in the study or see your study information, but I/we believe that risk is unlikely because of the procedures we will use to protect your information.

Confidentiality

If you agree to allow your [materials/information/biospecimens](#) to be used in the research, I/we will assign you a [pseudonym \(fake name\)/code number or state other plans](#) and use that instead of your name on all of the materials before I/we begin analyzing them for the research study. These materials [will be stored in a secure location on the UT campus or describe other secure storage procedures if applicable](#). No information which could identify you will be shared in publications and presentations about this study [or databases in which results may be stored](#). If I/we wish to include your name, pictures, recordings, or other information that could identify you in publications or presentations, I/we will ask for separate written permission for this.

Future Research

Either

Your [materials/information/biospecimens](#) may be used for future research studies or shared with other researchers for use in future studies without obtaining additional informed consent from you. If this

happens, all of your identifiable information will be removed before any future use or sharing with other researchers.

Or

Your [materials/information/biospecimens](#) will not be used or shared with other researchers for future research, even if identifiers are removed.

Contact Information

If you have any questions about this research, please contact me, [name of researcher, at netID@utk.edu or telephone number](#) or [my advisor, name of advisor, at netID@utk.edu or telephone number](#)—**required for student studies**. If you have any questions about your rights as a research participant, please contact the Institutional Review Board (IRB) of the University of Tennessee, Knoxville, at utkirb@utk.edu or 865-974-7697. You may also contact the IRB with any problems, complaints or concerns you have about a research study.

Voluntary Participation

It is completely up to you to decide to be in this research study. Even if you decide to be part of the study now, you may change your mind at any time by [insert here procedures for discontinuing participation](#). You will not lose any services, benefits, or rights you would normally have if you choose not to volunteer, or if you change your mind and stop being in the study later. If you do not wish to be in the research, it is not necessary to do anything, as [I/we](#) cannot use your materials without your consent.

Consent

I have read the above information. I have received a copy of this form. I understand that my participation in this research study includes allowing [name of researcher](#) to use my [materials/information/biospecimens](#) for research purposes. I agree to be included in this study.

Participant's Name (printed) _____

Participant's Signature _____ Date _____

If the materials to be analyzed include images or videorecordings, these should have been listed above in the Participation section, and the additional signature line below should be added. **If appropriate, use additional signature lines for other uses of images** (e.g., teaching, publication, presentation)

Consent for use of images

I agree that [photograph/videorecording](#) of me from [name of program, class, workshop, etc.](#) may be analyzed for research purposes.

Participant's Signature _____ Date _____