**Guidelines for Creating an Assent Document for Minors Ages 14-18**

**Instructions to PI**: While children under the age of 14 require sufficient information to assent to participation, those 14 years old and older are entitled to a more sophisticated and detailed document. The sample template below can serve as guidance. **Please complete the prompts in red. Delete these instructions and the prompts from the form you submit for review.**

**Assent to Participate in a Research Study**

*Explain the research in age-appropriate language*.

We are doing a research study about *xxx .*

You are being asked to participate because *xxx .*

Please read this and ask us any questions you have about the study.

*Explain procedures and tasks; describe length of time for participation, frequency and duration of procedures, any other information collected such as student records; etc.  Explanations need to be in age-appropriate language. If applicable, explain any alternative procedures or courses of treatment available to the participant*.

If you agree to be in this study, you will be asked to do the following things xxx

When the researchers do things like [*list related procedures, including things like gathering student records*], some other things could happen. For example, [*list related risks here, tying them back to the procedures if it makes sense to do so*]. We will do everything we can to prevent those things from happening, but there is still a chance, so we want you to know that first.

*Include one of the following options*:

*Option 1:*

If you are in this study, there are also some things that [*you may like/may be good for you*], such as [*list* ***only*** *direct benefits*].

OR

*Option 2:*

Not everyone who is a part of research studies receives something good from it. In this study, nothing directly good will happen to you, but you will help us learn more about people like you. Also, we will tell other people about what we learned from doing this study with you and the [*number*] other people who are in the study, but we won't tell anyone your name or that you were in the study. *If the child will receive compensation, please tell them about it here; otherwise, delete the sentence:* For your efforts in our study, we will give you X *compensation*.

If this sounds like something you would like to do, we will ask you to say that you understand what we talked about [*modify for online studies or for studies in which the potential participant reads the form]*, and that you do want to participate. You do not have to be in this study if you do not want to be. If you want to skip a question we ask or not answer it that is okay. If you decide to stop after we begin [*insert brief description of procedures here*], that's okay, too. Just let us know. No one will be upset if you don't want to do this or change your mind later.

You can ask any questions you have, now or later. Your parents know about this research study, and they have said you can participate, if you want.

If you sign this paper, it means that you have read this and that you want to be in the study. If you don’t want to be in the study, don’t sign this paper.

Name of Participant (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person obtaining consent (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Signature of person obtaining consent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**If using audio or video recording, use this section for signatures:]**

**I agree to be audio/video recorded for this study**

Name of Participant (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person obtaining consent (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Signature of person obtaining consent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**I agree to be interviewed, but I do not want to be audio/video recorded:**

Name of Participant (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person obtaining consent (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Signature of person obtaining consent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_