MARQUETTE UNIVERSITY RESEARCH INFORMATION SHEET

*Study Title*

Principal Investigator Name

Department

* You have been asked to participate in a research study. You must be age 18 or older to participate.
* The purpose of this study is (clearly and simply state study purpose).
* The study involves (describe procedures) and will take about (amount of time) to complete.
* You will be asked to answer questions about (describe topics here-make sure to include any potentially sensitive topics).
* (If deception is involved please include a sentence about this and why it is being used.)
* Your name and other identifying information, including IP address, (will/will not) be collected.
* (If audio/video recording interviews please state this.)
* Your responses will be (Pick one: anonymous or kept confidential).
* The risks associated with this project are minimal and there are no direct benefits to you.
* \*Include the following if conducting online surveys: Collection of data and survey responses using the internet involves the same risks that a person would encounter in everyday use of the internet, such as hacking or information unintentionally being seen by others.
* \*If conducting focus groups include the following statement: Everyone who participates in the focus group will be instructed to keep discussions confidential. However, the researchers cannot guarantee that all focus group participants will respect everyone’s confidentiality.
* For participating in this study you will receive (describe incentive form and amount. Delete if no incentive).
* Your participation is completely voluntary and you may withdraw from the study at any time.
* You can skip any questions you do not wish to answer.
* Your decision to participate will not impact your relationship with Marquette University (include if applicable: or your instructors/employers).

If you have any questions about this study, you can contact (PI’s name) at (PI phone number) or (PI email). If you have questions or concerns about your rights as a research participant, you can contact Marquette University’s Office of Research Compliance at (414) 288-7570.

Thank you for your participation.

I understand that by clicking the 'I Agree' button below, I am providing my electronic signature with the intent to sign this document and acknowledge that my electronic signature will be associated with this electronic record.