**UNIVERSITY OF GEORGIA**

**CONSENT LETTER**

**[TITLE OF THE STUDY]**

***Instructions:*** *Instructions appear in italicized red font. Recommended language appears in black font. This template must be modified to fit your study. Remove italicized directions/guidance and red font when drafting your consent document. To ensure comprehension, avoid academic phrasing and technical terminology; aim for a readability level no higher than 8th grade.*

Dear Participant,

My name is *First Name Last Name* and I am a faculty member in the *xxxx* Department at the University of Georgia [or My name is *First Name Last Name* and I am a student in the *xxxx* Department at the University of Georgia under the supervision of *Faculty Advisor First Name Last Name]*. I am inviting you to take part in a research study.

*Describe the study purpose: Why is it being conducted? What is the research question? What is being studied?* I am doing research on *xxxx*.

*Describe why the person is invited to be in the study: what are the eligibility criteria?* I am looking for *xxxxx.*

*Briefly state what a participant will be asked to do, including the estimated time commitment and location. Specify if there is any additional activity like audio recording or access to personal records.*  If you agree to take part in this study, you will be asked to *xxxx*. There will be *xx* sessions. Each session will be *xx* minutes and will be in *xxxx Hall.*

Participation is voluntary. You can refuse to take part or stop at any time without penalty. *Provide assurance that the decision to refuse or withdraw will not affect any benefits the participant is otherwise entitled to or other activities that are otherwise conducted.*  Your decision to participate will have no impact in your participation in *xxxx* programs.

*Describe any possible reasonably foreseeable risk and discomfort as well as ways to reduce risk and discomfort.* There are questions that may make you uncomfortable. You can skip these questions if you do not wish to answer them.

*Describe potential benefits to the subject and to others (society).* Your responses may help us understand *xxxxxxx.*

*Describe how privacy concerns and confidentiality will be addressed. If research records include identifiers or codes that are linked to individuals via a master list or code key, explain this and indicate when the identifiers will be removed/destroyed.*  Research records will be labeled with study IDs that are linked to you by a separate list that includes your name. This list will be destroyed once we have finished collecting information from all participants.

*Include one of the following:*

*If the information will be used or shared after the identifiers have been removed, for example with other researchers and/or for future studies without additional consent, describe this possibility.*

*OR*

*If the information will not be used or distributed for future research, state this.*

***ADDITIONAL SECTIONS – Most studies will require one or more additional sections. Please refer to the ‘Consent Additional or Optional Sections’ document for further guidance.***

*Inform participants of who to contact with questions about the research and where to direct questions about participant rights*.If you are interested in participating or have questions about this research, please feel free to contact me at *XXX-555-1234, email@domain.edu*. If you have any complaints or questions about your rights as a research volunteer, contact the IRB at 706-542-3199 or by email at IRB@uga.edu.

Please keep this letter for your records.

Sincerely,