Short Form Documenting Oral Presentation of Informed Consent Requirements

**[Title of Study]**

You are being invited to participate in a research study conducted by [PI name or names], a/n [Assistant, Associate, Professor] in the [Department Name] at Utah State University. Before you agree to participate, the researcher must tell you a few things in your native language.

The researcher is required to inform you about:

* The purpose of the research study they are asking you to participate in
* The procedures you [or your child] will be asked to participate in, as well as any other information they are getting about you [or your child] from other sources.
* How long your participation in this research study will take.
* Whether any of the procedures are experimental – in other words, whether they are trying something new with you [or your child] to see if it works well.
* Any risks or discomforts that might occur as a result of your participation.
* Any benefits that might occur as a result of your participation.
* If there are any alternatives you might be interested in, rather than participating, that could be helpful.
* How they will maintain your confidentiality (in other words, how they will keep your participation secret).

The researcher might need to tell you some of these items, if they are relevant. If you are interested in any of these items, please ask the translator or researcher before you agree to participate.

* Whether you will be compensated for your participation.
* Whether there is medical treatment available if you are injured as a result of your participation.
* The circumstances under which the researcher could terminate your participation.
* Whether there are any costs to you to participate.
* What, if anything, will happen if you stop participating at any time.
* When and how you will be notified if any new findings that you would want to know about during the course of your participation.
* How many other people will be participating in this study.

Your participation in this research is completely voluntary. You will not be penalized or lose benefits if you do not want to participate, or if you later decide to stop.

If all of this information has been presented to you orally, you may agree to participate by signing below. The researcher should also give you another document, called a/n Informed Consent [or Letter of Information], which gives you the above information in English. If this information has not been given to you, please do not agree to participate. Please also ask any questions you might have before you agree to participate. It is important that you fully understand the circumstances of participation; please do not feel pressured or rushed to make a decision.

The Institutional Review Board (IRB) for the protection of human research participants at Utah State University has reviewed and approved this study. If you have questions about the research study itself, please contact the researcher at [phone number] or [email address]@usu.edu. If you have questions about your rights or would simply like to speak with someone other than the research team about questions or concerns, please contact the IRB Chair at (435) 797-3059 or [irb@usu.edu](mailto:irb@usu.edu).

Signature of Participant

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Witness to Oral Presentation

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_