MODEL FORM

TITLE OF RESEARCH STUDY
INFORMED CONSENT FORM (FOR MINORS)

(Typically used for studies exceeding minimal risk)

The elements of the Informed Consent Form for Adults are used with the following variations:

1. **Investigator's name**, who is **title/position**, at the University of New Orleans has requested your minor child's (ward's) participation in a research study at this institution.

2. [same as adult version]

3. **Your child's (ward's) participation will involve**... [Be sure to include the following “no penalty” statement: “Your child's (ward's) participation in this study is voluntary. If you choose not to have your child (ward) participate or to withdraw your child (ward) from the study at any time, there will be no penalty. It will not affect your child’s (ward’s) (grade/treatment/care, etc., please choose the one that applies to the proposal). Likewise, if your child (ward) chooses not to participate or to withdraw from the study at any time, there will be no penalty.”]

4. [same as adult version]

5. [same as adult version]

6. **The possible benefits of your child's (ward's) participation in the research are**...

   OR

Although there may be no direct benefits to your child (ward), the possible benefits of your child's (ward's) participation in the research are...

7. The results of the research study may be published but your child's (ward's) name or identity will not be revealed. In order to maintain confidentiality of your child's (ward's) records, **name of investigator** will...

8. [same as adult version]

9. **Payment for your child's (ward's) participation is as follows**: [same as adult]

   OR

   You will not be paid for your child's (ward’s) participation.

10. [same as adult version]

11. [same as adult version]

12. [same as adult version]

(Release statement for videotaping or relinquishing confidentiality must be inserted here if applicable.)

__________________________________________________________________________  ____________________________________________________________________________  _______________________________________
Signature                                                 Printed Name                        Date

(Father, Mother, Legal Guardian, or Legally Authorized Official)

13. [same as adult version]

14. [same as adult version]
15. [same as adult version]