Chapman University

Name of the Academic Unit (e.g., School, Lab, Research Group)

Consent Form for Joining a Database of Research Participants

Name of Database Administrator:

Name of Subject Recruitment Database:

IRB #:

The form below gives you information about the Subject Recruitment Database so you can make an informed decision about whether or not you would like your name and information to be included in this catalogue of information.

### 1. What is the purpose of this subject recruitment database?

The purpose of this subject recruitment database is …

### 2. Who is being asked to BE INCLUDED in this database?

[Describe the characteristics of desired participants including gender, age, health limitations, medical conditions, etc.]

### 3. WHAT will my participation in this database involve?

If you agree to be included in the subject recruitment database ….

[Describe what information will be requested, how it will be obtained, how it will be used, how participants may be contacted in the future for studies, how often participants will be contacted, and explain that there this is only one of several recruitment databases at Chapman University…]

### 4. What are the possible benefits of my INCLUSION in this database?

[Use the following suggested statement for this section:]

“You may not directly benefit from being included in this database; however, we hope that your inclusion in the database may …(describe societal benefits).”

### 5. What are the possible risks of my inclusion in the database?

[Inform the participant of any risks associated with being included in the database (mainly confidentiality?)]

### 6. how will my personal information be protected?

[Describe protections that you will use to keep the electronic or hard copy information secure. How will you provide information to colleagues eligible to use the data?] For example:

“The researchers will keep all database records in a secure location. All electronic files (e.g., database, spreadsheet, etc.) containing identifiable information will be password protected. Any computer hosting such files will also have password protection to prevent access by unauthorized users.”

**7. WHO WILL HAVE ACCESS TO MY INFORMATION?**

Members of the research team maintaining this database under IRB [xx-xxx] will have access…

[If database information is to be released to persons not listed in the IRB protocol referenced above, describe the person(s) to whom information will be furnished, the nature of the information to be furnished, the purpose of the disclosure and whether the participant’s name will be used.]

### 8. WHAT IF I HAVE QUESTIONS?

[Include the following required information on all consent forms].

“Take as long as you like before you make a decision. We will be happy to answer any question you have about this study. If you have further questions about this database you may contact [insert name and phone number of database researcher]. If you have any questions concerning your rights as a research subject, you may contact the Chapman University Institutional Review Board (IRB) at (714) 628-2833 or irb@chapman.edu.

.

### 9. may i change my mind about being included in the database?

[Required statement to begin section:]

“You do not have to be a part of this database if you do not want to. If you agree to be in the database, but later change your mind, you may drop out at any time. There are no penalties or consequences of any kind if you decide that you do not want to participate.”

### 10. VOLUNTARY CONSENT

[Use the following sentence for this section:]

Participation in the subject recruitment database is completely voluntary. You may withdraw from the database at any time.