**SURVEY PARTICIPANT INFORMATION AND CONSENT FORM**

**Study Title:** COMPLETE

**Researcher(s):** [YOUR NAME, POSITION (Faculty, Graduate or Undergraduate Student, Post Doc, Staff), DEPARTMENT, UNIVERSITY, PHONE, EMAIL]

**Supervisor:**  [SUPERVISOR’S NAME, DEPARTMENT, PHONE NUMBER, EMAIL]

*[IF APPLICABLE]:* List co-Investigator(s), Research Assistants individually: NAME(S), DEPARTMENT, INSTITUTION, PHONE, EMAIL.

**INTRODUCTION**

You are invited to take part in this study because you are a brief statement of how participants fit the studies inclusion criteria.

Your participation is voluntary. If you decide to participate, you will be asked to complete this this survey. If you do decide to take part in this study, you are still free to withdraw at any time and without giving any reasons for your decision.

Please take time to read the following information carefully. If you have any questions, please contact one of the investigators listed at the top of this form.

**WHY IS THIS STUDY BEING DONE?**

* [Describe the purpose of your project—why are you conducting this research? What research questions are you trying to answer?]
* [Include the use of data here, for example publishing, presentations, thesis etc. It is best to be broad, and cover all of your bases so that there is no need to seek consent again if there are changes.]
* For student projects conducted as a requirement for a course or degree please mention this here.

**WHAT DOES THE STUDY INVOLVE?**

You are invited to complete a XX minute survey about XXX.

* Mention the time required and what the survey entails (e.g. reading case studies/vignettes and answering some questions about your perceptions of them, filling out various questionnaires related to mental health etc.).

**RISKS AND BENEFITS**

There are no known or anticipated risks to you by participating in this research. While there are no guaranteed direct benefits to you, our findings could potentially provide information to improve XX.

**If there are potential risks—for example to confidentiality or if subject matter is sensitive then those need to be listed here please:**

* List any known or anticipated risks **[**E.G., EMOTIONAL, SOCIAL, PSYCHOLOGICAL, PHYSICAL, ECONOMIC, ETC.]
* **Risk(s) will be addressed by** [EXPLAIN]:
* Describe any debriefing procedures that will take place (include resources for counseling and other services)
* If appropriate, describe the circumstances under which you would terminate someone’s participation in the study

**CONFIDENTIALITY**

Your confidentiality will be respected. The results of this study may be presented in a scientific meeting or published (add any others), but your identity will not be disclosed.

If using Qualtrics as recommended by IS and the Compliance office:

The data collected in this study are strictly confidential. No identifying information will be collected at any time. We will treat your personal information as confidential although absolute privacy cannot be guaranteed. We collect data through the software Qualtrics, which uses servers with multiple layers of security to protect the privacy of the data (e.g., encrypted websites and password protected storage). Your data will be stored and protected by Qualtrics on Ireland- based servers but may be disclosed via a court order or data breach.

Please do not put your name or other identifying information in the questionnaire.

*Please include the following statement, if participant compensation is being offered and is subject to the University of Regina Financial Policy on honorariums of cash or cash equivalents (https://www.uregina.ca/research/for-faculty-staff/ethics-compliance/human/policies.html):*

Any personal information collected as a record of participant compensation will be stored in Financial Services and may be kept for 7 years in case the University of Regina is subjected to a financial audit*.*

Describe the measures that will be taken to protect both hard copy data and electronic copy data during and post study. State how long the data will be kept before being destroyed (must be kept for 5 years) and explain the method of destruction for both hard copy and electronic data.

**RIGHT TO WITHDRAW**

Your participation is voluntary. If you do decide to take part in this study, you are still free to withdraw by not submitting your survey responses. Once submitted, it will not be possible to remove your response *provide the rationale if this is the case, i.e. anonymous survey or partial responses important for scientific integrity of the study etc.* If you choose not to participate, this will have no effect whatsoever on your involvement with the researchers.

Please note that participants that withdraw should still receive compensation if there is compensation being offered as per TCPS 2, article 3.1b:

*The participant should not suffer any disadvantage or reprisal for withdrawing, nor should any payment due prior to the point of withdrawal be withheld. If the research project used a lump-sum incentive for participation, the participant is entitled to the entire amount. If a payment schedule is used, participants shall be paid in proportion to their participation.*

**HOW CAN I OBTAIN MORE INFORMATION ABOUT THIS STUDY?**

A summary of the findings once the study has ended will be available here. Should you choose to contact the researchers to ask questions, you will no longer be anonymous to the research team; however, we will not be able to link your study responses to you (if the survey is anonymous). Study information you provide to us will be *anonymous, or if not anonymous, confidential and we will identify your study information by a participant number only*.

**WHO DO I CONTACT IF I HAVE QUESTIONS ABOUT THE STUDY?**

* Contact the researcher(s) using the information at the top of this page.
* This project has been approved on ethical grounds by the University of Regina Research Ethics Board on [insert date]. Any questions regarding your rights as a participant may be addressed to the committee at 306-585-4775 or [research.ethics@uregina.ca](mailto:research.ethics@uregina.ca). Out of town participants may call collect.

By completing and submitting the questionnaire, **YOUR FREE AND INFORMED CONSENT IS IMPLIED** and indicates that you understand the above conditions of participation in this study.