**SURVEY CONSENT FORM**

Study Title: [TITLE]

Researcher: [PRINCIPAL INVESTIGATOR NAME], [INSTITUTION]

I/We are asking you to be in this research study because [DESCRIBE ELIGIBILITY]. You must be age 18 or older to participate in the study. The information in this consent form is to help you decide if you want to be in this research study. Please take your time reading this form and contact the researcher(s) to ask questions if there is anything you do not understand.

1. **PURPOSE**. The purpose of the research study is [DESCRIBE STUDY PURPOSE].
2. **PROCEDURE**. If you agree to be in this study, you will complete a survey. The survey includes questions about [DESCRIBE QUESTIONS/THEMES] and should take you about [APPROXIMATE LENGTH] to complete.
3. **RISKS/BENEFITS**. It is unlikely that you will experience any risks or discomforts beyond what would be experienced in everyday life by participating. There are no specific benefits associated with participating.
4. **COMPENSATION**. You will be offered compensation in the form of [ENTER COMPENSATION OR N/A].
5. **CONFIDENTIALITY**. The data collected in this study are completely anonymous. No personally identifiable information will be collected and the information you choose to provide in this study cannot be connected back to you. Results from this study may be published or presented at research conferences, and the anonymous data and may be shared with other researchers through an online data repository.
6. **VOLUNTARY PARTICIPATION**. Your participation in this study is voluntary and you may choose to not participate or end your participation at any time without penalty.
7. **QUESTIONS**. If you have any questions about this study, you may contact [CONTACT NAME] by phone at [CONTACT PHONE #], or by email at [CONTACT EMAIL ADDRESS].
8. **CONSENT**. I have read and understand the above consent form. I certify that I am 18 years old or older.

**Participant Signature**: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/) Date: [DATE]

Print Name: [PARTICIPANT'S PRINTED NAME]