**Sample Consent Form**

**(MINIMAL RISK RESEARCH WITH STUDENTS USING SURVEYS TO COLLECT DATA)**

\_\_\_\_ = sections that should be tailored to the research you are conducting

**INFORMATION AND CONSENT TO PARTICIPATE IN RESEARCH**

**Title: Exploring the Experiences of Conestoga College Students**

You are being asked to participate in a research study conducted by Dr. Someone, from Student Services at Conestoga College Institute of Technology and Advanced Learning (CCITAL). This research is being funded by some organization.

If you have any questions or concerns about the research, please feel free to contact Dr. Someone at (519) 555-1111 or [someone@somewhere.com](mailto:someone@somewhere.com).

**PURPOSE OF THE STUDY**

This study is designed to examine the experiences of first year students at Conestoga College and determine how to better support students in their first year.

**PROCEDURES**

If you volunteer to participate in this study, it will take approximately 30-45 minutes. During this time you will be asked to:

* complete an online survey
* offer your feedback about Conestoga College including your suggestions for how Conestoga could improve its supports for first year students
* participate in a follow-up survey six months after you first participate (you will be contacted directly using your student email for this follow-up survey)

**POTENTIAL RISKS AND DISCOMFORTS**

Discussing your experience as a new student could cause you to feel upset but this is not an unusual response

* If any part of your participation in this research makes you feel upset and you would like to talk about this with someone after the interview, please make an appointment with Counselling Services by visiting their office located in the Student Life Centre, 1A101, or by calling them at 519-748-5220, x3360.

**POTENTIAL BENEFITS TO PARTICIPANTS AND/OR TO SOCIETY**

By participating in this study:

* you are offered the opportunity to talk about your experiences as a first year student at Conestoga College
* you will increase the knowledge held by researchers, the College and policy makers about first year experiences
* your comments and feedback may also help improve the services currently offered to support first year students by the College

**CONFIDENTIALITY**

Every effort will be made to ensure confidentiality of any identifying information collected in this study:

* **The researcher** will not collect your name or any other contact information.

*[****Choose (and include) which of the statements below apply****.* ***Delete the ones that do not apply****.]*

* At no time will any specific answers be attributed to any participant. Internet protocol (IP)addresses will not be collected.
* In the event that IP addresses are collected, the Principal Investigator (PI) will ensure thatthe investigators will not be able to view the IP addresses of any of the responses.
* Only one (1) password to access the data exists; that password is held by the PrincipalInvestigator (PI).
* All survey-related data is SSL encrypted when transmitted to/from the web server(similar to what banks use to transmit secure information).
* All survey-related data is encrypted when stored on the web server's storage system.
* All administrator access to the server is protected with strong passwords and where possible, firewall protection systems.
* Only the researcher, Dr. Someone, will have access to survey data
* The funding agency “Some Organization” will only have access to any coded data which will have all identifying information removed.

**HANDLING AND** **SECURITY OF DATA**

Data collection can never be guaranteed to be completely secure. However every effort will be made to ensure that your privacy and confidentiality is protected throughout the study. Data will be kept for 5 years and then destroyed by Dr. Someone.

**ANONYMITY**

* Your data will be coded so that only the researchers are able to link your comments or data to your name
* All data will be presented in reports, presentations or other final summaries in a summarized format so that no one will be able to identify you from your comments or data.
* Researchers will need to use your personal email to contact you for follow up phases of the study.

**PARTICIPATION, WITHDRAWAL and RIGHTS OF RESEARCH PARTICIPANTS**

You can choose whether to be in this study or not.

* You may withdraw consent at any time without academic or other consequences of any kind.
* You may exercise the option of removing your data from the study. However once all identifying information has been removed, all interviews and survey responses will become anonymous and it will not be possible for participants to ask for their data to be removed from the study.
* You may also refuse to answer any questions you don’t want to answer and still remain in the study.
* The investigator may withdraw you from this research if circumstances arise that warrant doing so.
* You are not waiving any legal claims, rights or remedies because of your participation in this research study.

**PAYMENT FOR PARTICIPATION**

* For your participation, your name, if you are interested, will be placed into a draw to win a $50 gift card for the Conestoga College Bookstore.
* Once winners of the draw are selected and contacted, all names and identifying information will be destroyed.
* If you wish to participate in the draw, you will be asked to provide personal contact information.

**RESULTS OF THE STUDY**

The results of the study will be shared in reports, conferences, presentations and may be published in the following formats: in electronic newsletters, other promotional materials, reports and in published journals. The results of the study will be available to you at the following website: [example.com](http://www.somewebsite.com) by date.

**This study has been reviewed and received ethics clearance through the CCITAL Research Ethics Board.**

If you have questions regarding your rights as a research participant, contact:

Research Ethics Coordinator

Conestoga College Institute of Technology and Advanced Learning

96 Grand Avenue South, Cambridge, Ontario, N1S 2L9

[rebcoordinator@conestogac.on.ca](mailto:rebcoordinator@conestogac.on.ca)

**SIGNATURE OF RESEARCH PARTICIPANT/LEGAL REPRESENTATIVE**

* I have read and understood the information provided for the study “Exploring the Experiences of Conestoga College Students” as described herein.
* I understand the potential risks and discomforts involved.
* My questions have been answered to my satisfaction.
* I have been given a copy of this form or have printed off a copy of this form from the online survey.
* I agree to participate in the research study.
* I have provided my verbal consent to participate in this study or I have clicked on the Yes I want to participate box on the online survey.

□ Yes □ No I agree to participate in this study

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Name of Participant (please print) Signature of Participant Date

SIGNATURE OF WITNESS

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Name of Witness (please print) Signature of Witness Date

**Acknowledgements** – This form has been adopted from the University of Guelph with their permission, Conestoga College gratefully acknowledges the contribution of the University of Guelph in this regard.