# ASSENT TO PARTICIPATE IN RESEARCH

## [Insert title of the study using 15-point bold type.]

### If you are conducting face-to-face procedures, please keep the statement in the box or delete this entire section if you are not conducting face-to-face procedures

***There is a virus that is going around called COVID-19 and it may make you sick. If you take part in this research study, we will try our best to keep you safe from getting COVID-19. But even though we try to keep you safe from getting COVID-19, there may be a chance you can still get this virus.***

1. My name is [identify yourself to the child by name].
2. We are asking you to take part in a research study because we are trying to learn more about [outline what the study is about in language that is both appropriate to the child’s maturity and age].
3. If you agree to be in this study [describe what will take place from the child’s point of view in language that is both appropriate to the child’s maturity and age].
4. [Describe any risks to the child that may result from participation in the research].
5. [Describe any benefits to the child from participation in the research].
6. Please talk this over with your parents before you decide whether or not to participate. We will also ask your parents to give their permission for you to take part in this study. But even if your parents say “yes” you can still decide not to do this.
7. If you don’t want to be in this study, you don’t have to be. Remember, being in this study is up to you and no one will be upset if you don’t want to or even if you change your mind later and want to stop.
8. You can ask any questions that you have about the study. If you have a question later that you didn’t think of now, you can call me at [insert your telephone number] or ask me next time. [If applicable: You may call me at any time to ask questions.] If I have not answered your questions or you do not feel comfortable talking to me about your question, you or your parent can call the UNLV Office of Research Integrity – Human Subjects at 702-895-0020.
9. Signing your name at the bottom means that you agree to be in this study. You and your parents will be given a copy of this form after you have signed it.

Print your name Date

Sign your name