Name of NAU Student/Researcher:

Degree Sought [e.g., EdD, MBA, etc.]:

Title of Research Project/Study:

Purpose of Research:

Your participation in the above-named researcher’s project is greatly appreciated and will consist of [include research methodology]. You can choose whether or not to participate, and you may withdraw from the study at any time with no penalty. The researcher may terminate any interview to protect participants from harm or distress, and may exclude portions of your interview that deviate from study objectives. The results of the research study may be published but your identity will remain confidential and your name will not be made known to any outside party.

With this research, there are no foreseeable risks to you, except as follows: [list any risks, e.g. “none”].

If you have any questions about the research study or your rights as a participant, please contact the researcher at [phone number and email address]. If you have any concerns or complaints, please contact the National American University Institutional Review Board via email at IRB@national.edu.

As a participant in this study, you understand and agree to the following:

1. You may choose not to be part of this study and you may withdraw from the study at any time.
2. Your identity is confidential.
3. You must give permission for the researcher to record the interviews. You understand that the information from the recorded interviews may be transcribed. The researcher will develop a way to code the data to assure that your name is protected.
4. Data will be kept in a secure and locked area. The data will be kept for three years and then destroyed.
5. The results of this study may be published.
6. The researcher has fully explained the nature of the research study and has answered all questions and concerns about the research study.

By checking “I accept the above terms” and signing this form below, you agree that you understand the nature of the study, the possible risks to you as a participant, and the extent to which your identity will be kept confidential. You confirm that you are at least 18 years of age and that you are willing to volunteer as a participant in the study described above.

 ( ) I accept the above terms ( ) I do not accept the above terms (CHECK ONE)

Participant Signature: Date:

Print Name:

Researcher Signature Date:

Print Name: