2015 MASSACHUSETTS STATE SCHOOL STATE SCIENCE & ENGINEERING FAIR
MIDDLE SCHOOL DIVISION

INFORMED CONSENT FORM C

Required for all research involving humans.
RSRC Approval required before experimentation.
Retain a copy of this application and any accompanying material for your records.

****Must attach copies of all informed consent forms with subject/parent's signature to the Registration Form****

Student's Name _____

Title of Project _____

To be completed by Student Researcher: (All questions are applicable and must be answered; additional page may be attached.)

1) Describe the purpose of this study and list all of the research procedures in which the subject will be involved. Include the duration of the subject involvement. Attach any surveys or questionnaires.

2) Describe and assess any potential risk or discomfort, and, if any, potential benefits (physical, psychological, social, legal or other) that may be reasonably expected by participating in this research.

3) Describe the procedures that will be used to minimize risk, to obtain informed consent, and to maintain confidentiality.

For questions or concerns regarding this research, contact: _____ at_____
Teacher/Adult Sponsor *Email/phone*

TO BE COMPLETED BY HUMAN SUBJECT
(prior to experimentation)

☐ I have read & understand the conditions above; I consent/assent to voluntarily participate in this research study.

☐ I realize I am free to withdraw my consent and to withdraw from this study at any time without negative consequences.

☐ I consent to the use of visual images (photos, videos, etc.) involving my participation in this research.

_____
Signature *Date*

TO BE COMPLETED BY PARENT/GUARDIAN
(prior to experimentation and when participant is under 18 and informed consent is required)

☐ I have read and understand the conditions and risks stated above and consent to the participation of my child.

☐ I have reviewed a copy of any survey or questionnaire used in the research.

☐ I consent to the use of visual images (photos, videos, etc.) involving my child in this research.

_____ _____
Signature *Date*