NOTE TO INVESTIGATORS: This is the child assent 7-12 form. We request that you submit to the RSRB a consent form where the text you have added is in black and all blue text is left unchanged.

We acknowledge there may be some deviations from the established language (all blue text) based on the nature of your study. Be sure to eliminate all brackets and eliminate this page before submission. Eliminate those paragraphs within the brackets which were for clarification.
Assent Script
Children ages 7-12

[Insert Title of Study]

Principal Investigator: [Insert Name]
Faculty Advisor: [Insert or delete if not applicable.]

We are doing a research study.

These are some things we want you to know about research studies:
Your parent needs to give permission for you to be in this study.

Why are you being asked to be in this research study?

We are studying how kids’ [brains, or other body parts, if applicable] work.
[Provide additional info as appropriate to the study. Make sure to use very simple language, so that even the youngest children you may test will understand what you mean.]

What will happen during this study?

If you want to be in our study, we will ask you to lie in a machine that allows us to take pictures of your brain. This machine is safe but there is not a lot of space in it. To take the pictures, your head will be placed in a helmet and you will be asked to lie very, very still. The machine makes lots of noise when it is working, so we will ask you to wear hear plugs. We will also give you a ball that you can squeeze at any time if you want the machine to stop and get out. You will be able to talk to us and we can see you on our big TV screen.

You do not have to be in this study. Even if your parents say it’s OK for you to be in the study, you can still say NO. If you do not want to, you can say so now. If you say yes but change your mind later, you can stop whenever you want.

Do you have any questions? Do you think you want to be in the study?

Who will be told the things we learn about you in this study?

[Describe who will have access to the information collected. Be clear about whether pregnancy, illegal activity, psychological tendencies will be reported and to whom. Be clear about what parents and teachers will be told (e.g. “The
information we collect about you will be kept private. Only the people working on this study will be able to look at the information we collect. It will not affect how your doctor [or teacher, etc.] treats you.

Will you get any money or gifts for being in this study?

[Choose ONE applicable sentence.]
You will not receive any money or gifts for being in this study.
-OR-
You will receive XX for being in this study. [If subjects are to be paid for participation, specify the amount, schedule of payment and conditions for payment. When applicable, payments should be based on a prorated system. If subjects will be given some token “gift” (e.g., a toy), instead of payment, describe in appropriate terms.]

Remember, being in this study is up to you and your parents. If you don’t feel like you want to do this right now, just tell us. Even if your parent says it is all right for you to be in this study, you don’t have to.

If you start, you may stop being in the study at any time. If you decide to stop, no one will be angry or upset with you.

It is important that you understand what you will do in this study. Please ask us any questions you have at any time.

What questions do you have?
[It is the responsibility of the person obtaining assent to ensure that the child understands the study to an age-appropriate degree. Asking questions can help children decide.]
Do you want to be in the study?

Subject Name: ____________________________________
(Printed by Person Obtaining Assent)

Person Obtaining Assent
I have read this form to the subject and/or the subject has read this form. An explanation of the research was given and questions from the subject were solicited and answered to the subject’s satisfaction. In my judgment, the child has demonstrated comprehension of the information. I have given the child adequate time to consider the study before providing assent. My signature below documents the subject’s assent to participate in this research study.

________________________________________
Name and Title (Print)

________________________________________        ____________
Signature of Person Obtaining Assent         Date