

(Sample Consent Short Form — to be used with oral presentation)

**THE UNIVERSITY OF SOUTHERN MISSISSIPPI
AUTHORIZATION TO PARTICIPATE IN RESEARCH PROJECT**

Participant's Name _____

Consent is hereby given to participate in the research project entitled _____ . All procedures and/or investigations to be followed and their purpose, including any experimental procedures, were explained by _____ . Information was given about all benefits, risks, inconveniences, or discomforts that might be expected.

The opportunity to ask questions regarding the research and procedures was given. Participation in the project is completely voluntary, and participants may withdraw at any time without penalty, prejudice, or loss of benefits. All personal information is strictly confidential, and no names will be disclosed. Any new information that develops during the project will be provided if that information may affect the willingness to continue participation in the project.

Questions concerning the research, at any time during or after the project, should be directed to researcher(s) name(s) at telephone number(s). This project and this consent form have been reviewed by the Institutional Review Board, which ensures that research projects involving human subjects follow federal regulations. Any questions or concerns about rights as a research participant should be directed to the Chair of the Institutional Review Board, The University of Southern Mississippi, 118 College Drive #5147, Hattiesburg, MS 39406-0001, (601) 266-6820.

Use the following only if applicable: The University of Southern Mississippi has no mechanism to provide compensation for participants who may incur injuries as a result of participation in research projects. However, efforts will be made to make available the facilities and professional skills at the University. Information regarding treatment or the absence of treatment has been given. In the event of injury in this project, contact treatment provider's name(s) at telephone number(s).

A copy of this form will be given to the participant.

Signature of participant

Date

Signature of person explaining the study

Date