**INFORMATION IN BLUE IS INSTRUCTIONAL AND SHOULD BE REMOVED FROM THE FINAL DOCUMENT. INFORMATION IN RED IS VARIABLE AND REQUIRES EDITING.**

**CHANGE THE TEXT BACK TO BLACK ONCE EDITING IS COMPLETE. REVISIONS MAY NOT BE ACCEPTABLE TO REQUIRED LANGUAGE.**

**Use wording consistent with 5th to 8th grade reading level; simple words, short sentences, small paragraphs, etc.**

# BROAD CONSENT TO PARTICIPATE IN A FUTURE RESEARCH STUDY AT TEXAS A&M UNIVERSITY-CORPUS CHRISTI

**WHO IS DOING THIS STUDY?**

We are asking you if you would like to participate in future research studies conducted by Texas A&M University-Corpus Christi. Please read the information below and ask questions about anything that you do not understand before you make a choice.

**WHY IS RESERCH NEEDED?**

There are many things we do not know or understand complete. Research studies with the help of volunteers like you allow us to learn more. The purpose of this consent form is to ask your permission to be included in our recruitment database. Researchers will use this information to identify potential volunteers who might be a good fit for their research study.

**WHO CAN BE IN FUTURE RESEARCH STUDIES?**

We are asking you to consider being a part of future research studies because <state general characteristics of the participants>.

**WHAT ARE YOU ASKING ME TO DO?**

Contact Information

If you agree, your contact information will be shared with and stored in a recruitment database. By giving your contact information to future researchers, you can learn about research studies you may qualify for. Researchers will search this database to identify individuals who may be a good fit for their research study.

If you are identified as a good fit, you will be contacted by a member of the research team. When a member of the research staff contacts you, they will review the eligibility criteria to see if you qualify. The research team member will provide you details on the study, including the research purpose, a description of the research procedures, risks, and benefits to participating in the research study. At that time you can decide at that time whether to participate in the research study or not.

Other Information

To participate in the because <program name>, we collect the following information from you: <list data>.

This information may also be useful to future researchers. If you agree, the information collected from you as a <program name> participant will be shared with researchers.

**WHAT ARE THE RISKS?**

Confidentiality risk: Your participation will involve sharing existing information collected about you. There is a slight risk of loss of confidentiality. The risk is minimal because some of the information is publicly available (like your address or phone number).

Your confidentiality will be protected to the greatest extent possible.

**HOW WILL MY PERSONAL INFORMATION BE PROTECTED?**

Your information will be protected by:

* All data will be kept securely.
* The recruitment database containing your information will be seen only by authorized research team members.
* No identifiers linking you to this study will be included in any report that might be published or presentation.

**WHO WILL HAVE ACCESS TO MY INFORMATION?**

Only authorized personnel will have access to the recruitment database.

We will share your information only when we must, will only share the information that is needed, and will ask anyone who receives it from us to protect your privacy.

**WHAT ARE THE BENEFITS?**

There will be no direct benefits to you.

Your agreement to share your contact information with future researchers will help them in completing their research studies to learn more about <<research topic>>.

**WHAT ABOUT EXTRA COSTS?**

Participation in the recruitment database will not result in any extra costs or additional time commitments from you.

**DO I HAVE TO PARTICIPATE?**

No. **Being in a research study is voluntary.** If you choose not to participate, there will be no penalty or loss of benefits to which you are otherwise entitled.

**WHAT ARE THE ALTERNATIVES TO BEING IN THIS STUDY?**

You may choose not to participate. If you say no, your contact information will not be stored in the recruitment database or shared with future researchers.

**WHAT ARE MY RIGHTS AS A STUDY PARTICIPANT?**

**Being in a research study is voluntary.** If you choose not to share your information with future researchers, there will be no penalty or loss of benefits to which you are otherwise entitled.

Your choice will not affect your ability to participate in <program name>.

You do not have to be a part of this database if you do not want to. If you agree to be in the database, but later change your mind, you may drop out at any time. There are no penalties or consequences of any kind if you decide that you do not want to participate.

**After hearing of the individual research study, you may choose not to participate in research.**

If you agree to participate but change your mind, you may withdraw from the study at any time without penalty or loss of benefits to which you are otherwise entitled.

**WHO SHOULD I CALL IF I HAVE QUESTIONS OR PROBLEMS?**

**You may call <<PI name>> at << PI contact number>> with questions at any time during the study.**

You **may also call << lead study coordinator name>>, the study coordinator, at << study coordinator contact number>> with any questions you may have.**

You may also call Texas A&M University-Corpus Christi Institutional Review Board (IRB) with questions or complaints about this study at irb@tamucc.edu or 361-825-2497. The IRB is a committee of faculty members, statisticians, researchers, community advocates, and others that ensures that a research study is ethical and that the rights of study participants are protected.

# CONSENT TO CONTACT

The purposes, procedures, and risks of the recruitment database have been explained to me. I have had a chance to read this form and ask questions about the study. Any questions I had have been answered to my satisfaction. A copy of this signed form will be given to me.

**Use of Contact Information**

I agree that my contact information may be shared and stored in a recruitment database.

I agree that someone from the study team may contact me to ask about me participating in future research studies.

Yes No

**Use of Other Information**

I agree that my personal information collected as part of the <program name> may be shared with the recruitment database and be used by future researchers.

Yes No

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Signature of Participant Date

By signing below, I indicate that the participant has read and, to the best of my knowledge, understands the details contained in this document and has been offered a copy.

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Signature of Person Print Name: Date:

Obtaining Consent