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|  | **JOSE MARIA COLLEGE**  FOUNDATION, INC.  **RESEARCH ETHICS COMMITTEE** | JMCFI-REC Form No. | 5.5 |
| Revision No.: | 2 |
| **Informed Consent**  **Form (ICF)** | Approval Date: | August 19, 2022 |
| Effective Date: | August 26, 2022 |

|  |  |
| --- | --- |
| **Research Protocol Title:** |  |
| **Name of Researchers:**  Student/s  Faculty  Staff  Non-JMC |  |
| **Institution:** |  |
| **Course/Major:**  (Faculty/Staff: designation and sponsor) |  |

Greetings!

You are invited to participate in a research study conducted by the researcher/s, whose name/s is/are stated above, because you fit the inclusion criteria as a participant of our study.

If you wish to accept, your participation will be completely voluntary. Before fully deciding whether to participate or not, I/we would like you to read the information given below. If you have questions or do not understand something stipulated with in this consent form, do not hesitate to ask me/us. Please take as much time as you need to read and understand the consent form. You may also decide to discuss participation with your family or friends, if you wish to.

If you decide to participate, you will be asked to sign this consent form. A copy of this form will be given to you. Rest assured that the survey questionnaire does not contain your name or any identifiable information with you being an informant.

***PURPOSE OF THE STUDY***

*(state the content)*

***PARTICIPATION PROCEDURES/DURATION OF THE STUDY***

*(state the content)*

***BENEFITS TO PARTICIPANTS AND TO THE SOCIETY***

*(state the content)*

***COMPENSATION/MEDICAL TREATMENT IN CASE OF INJURY***

*(state the content)*

***CONFIDENTIALITY***

*(state the content)*

***POSSIBLE RISKS AND DISCOMFORTS***

*(state the content)*

***PARTICIPATION AND WITHDRAWAL***

*(state the content)*

***RESEARCHER/S CONTACT INFORMATION***

*(state the content)*

***RIGHTS OF THE PARTICIPANT***

Research participants have the right to ask questions, raise concerns and complaints. If the participant is unable to contact the researcher/s, do not hesitate to contact Jose Maria College, Research Office at (082) 227-0201 or visit the office at the fourth floor, Jose Maria College, Philippine-Japan friendship Highway, Sasa, Davao City.

***PARTICIPANT’S CONSENT (for minor participants, change this part with PARENTAL CONSENT)***

I, the research participant/informant, have read the information provided above. I have been given a chance to ask questions in relation to this consent form and to this study. My questions, if any, have been answered to my satisfaction, and I agree to participate in this study. I have been given a copy of this form and I am fully aware that I have the right to withdraw my consent at any time and discontinue my participation without penalty.

(Signature over Printed Name) (Date)

***ASSENT FORM (if the participants are minor)***

*(state the content)*

(Signature over Printed Name) (Date)

***RESEARCHER/S***

I have explained the entirety of the research to the participant/informant and answered all of his/her questions. I believe that he/she understands the information described in this document and freely consents to participate.

(Signature over Printed Name)

**Noted by:**

(Signature over Printed Name)

## Mentor/Adviser

RELEASED

**JMCFI-REC**

**By:**

**Date:**