**TEMPLATE INSTRUCTIONS**: Fill out the below information as it specifically relates to your research. Information included on this form should be consistent with the information provided in your application. Guidance is provided throughout this form in magenta. This information should be replaced with your research details. *Please write your responses below with your participants in mind as the reader.*

**TITLE OF PROJECT:**

**NAME OF PRINCIPAL INVESTIGATOR(S):**

**CONTACT NAME AND PHONE NUMBER FOR QUESTIONS/PROBLEMS:**

**PURPOSE OF THE RESEARCH:**

*[Please explain the purpose of the research using lay language, including the purpose of the data collection and its uses. Also include whether and under what conditions data may be used for future research, either related or unrelated to the purpose of the current study].*

**EXPLANATION OF PROCEDURES/METHODS TO BE USED:**

*[Please describe in non-technical language what participant can expect “to do” as a participant in the research study. Please indicate how long participation will last and, if there are multiple visits involved, what the participant can expect during each visit].*

**RISKS/ DISCOMFORTS INHERENT IN THE PROCEDURES:**

*[Please describe any risks or discomforts the participants may experience through participation in the study, however remote they may be].*

**POTENTIAL BENEFITS:**

*[Please describe any potential benefits to the participants from taking part in the study, if any. You may also describe the benefits to the institution and/or broader research community].*

**CONFIDENTIALITY:**

*[Please describe what identifiable information you will be collecting about the participants (including any audio or video recordings or photographs). Special categories of data collected must be clearly listed, including: racial or ethnic origin, political opinions, religious or philosophical beliefs; trade union membership; processing of genetic data; biometric data for the purposes of unique identification; health data; and/or sex life or sexual orientation information.*

*Please address how such information will be securely stored, who will have access to the data, security of transferring data, how long the data will be kept, and how it will be destroyed when no longer needed].*

***PLEASE NOTE THAT ALL PERSONAL DATA MUST BE STORED ON A PROTECTED MINES’ NETWORK DRIVE – YOU ARE NOT PERMITTED TO STORE ANY COPIES OF DATA LOCALLY ON A DESKTOP OR LAPTOP COMPUTER OR ON A PORTABLE STORAGE DRIVE****.*

Information obtained about you for this study will be treated as confidential to the extent allowed by law. Research information that identifies you may be shared with the Colorado School of Mines Human Subjects Team and others who are responsible for ensuring compliance with laws and regulations related to research.

**YOUR DATA RIGHTS**

***Section 1. [Researcher: Use the following only if all responses are de-identified and anonymous from the start. Delete these instructions and all of Section 2.]***

You have rights around the protection and movement of your data. This consent form provides transparency to the data collected about you and how it will be used. Because we are not collecting any identifying information about you, it will not be possible to extract your individual data if you want to withdraw your data from the study.

***Section 2. [Researcher: Use the following if you will retain the ability to identify an individual’s responses at any stage. Delete these instructions and all of Section 1.]***

You have rights around the protection and movement of your data. This consent form provides transparency to the data collected about you and how it will be used. Your rights include (but not limited to):

* Right to correct inaccurate personal data;
* Right to erase data that is no longer necessary for the research purposes or that you withdraw your consent to use. Note: if de-identified data is used, once identifiers are removed from the data and the data is added to the data set to be analyzed, it will be impossible to extract your individual data if you want to withdraw your data from the research.
* Right to know whether your personal data has been processed, what’s been processed, and the purpose for such.
* Right to restrict processing of the data where it’s inaccurate, unlawfully processed, or is no longer needed.
* Right to object to processing personal data for the purposes of public interest or legitimate interest pursued by the research and/or Mines.

**VOLUNTARY PARTICIPATION AND WITHDRAWAL:**

Your participation in this research is voluntary. If you decide to participate in the study, you may withdraw your consent and stop participating at any time without penalty or loss of benefits to which you are otherwise entitled. To withdraw, inform the principal investigator of your intention to withdraw.

If you are a Mines student or employee, taking part in this study is not part of your class work or duties. You can refuse to participate, or withdraw at any time, with no effect on your class standing, grades, or employment at Mines.

**QUESTIONS**

If you have questions, concerns, or complaints, or think the research has injured you in any way, please contact the Principal Investigator at the phone number provided above.

If you have questions about your rights as a research participant, please contact the Colorado School of Mines Human Subjects Research committee at humansubjects@mines.edu.

Your signature acknowledges that you have read the information stated and willingly sign this consent form. Your signature also acknowledges that you have received, on the date signed, a copy of this document containing 2 pages.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant name (printed)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant signature Date