**Assent Form – Ages 7 to 10**

Institutional Review Board | Ouachita Baptist University

*This form is distributed to subjects in approved IRB studies who are ages 7 to 10.*

|  |
| --- |
| **About the Study Leader** |
| My name is [provide your full name]. I [work OR go to school] at Ouachita Baptist University. I am inviting you to participate in a research study about [describe the topic of the study in simple language]. |
|  |
| **About the Study** |
| Your parent knows about this study, and gave permission for you to be involved. If you agree, I will ask you to [Describe what the child will be asked to do in simple language that is appropriate to the child’s age and maturity. If the child will be asked to do several things, describe each one in the sequence the child will experience. Explain how long each activity will last. If you are planning to audio record or video record, you should mention it here]. |
|  |
| **About Your Participation in the Study** |
| You do not have to be in this study. No one will be mad at you if you decide not to do this study. Even if you start the study, you can stop later if you want. You may ask questions about the study at any time.If you decide to be in the study, I will not tell anyone else how you respond or act as part of the study. Even if your parents or teachers ask, I will not tell them about what you say or do in the study. |
|  |
| **Agreement** |
| Signing here means that you have read this form or have had it read to you and that you are willing to be in this study. |
| **Printed Name of Participant** |  |
| **Signature of Participant** |  |
| **Date** |  |

*Your parent will receive a copy of this completed form.*