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| **Assent form for children age 7-12 years** |
| □ Original □ Revise No. ................................. Revise Date ............/............/............ |

(Adjust details to be consistent with the researcher's research project)

Protocol/Research Title.......................................................................................................................................

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This research project was conducted to study whether children......... (Specify research objectives)...........................

I invited you to join this project because your age is between..................years and healthy and........................ which I would like to study about………………………….

If you are willing to join this project, you will be treated as follows. (Specify details using language that is easy to understand so that children know how they will be treated or what they will be asked to do.)

1. You will answer a questionnaire about.......................................................,which will take about ……………..minutes.

2. You will be interviewed about ………………………… ,which will take about……………. minutes.

This study is being done by ........................................................................................(name of

the researcher) at ……. College. Phone number is …………. and e-mail address is …………………………..

This research has little risk. I will take good care of you. Don't let you be too tired. But if you feel uncomfortable or uncomfortable, you do not want to participate in this research. You can tell me at any time. And if you or your parents have any questions or concerns about the study, you can call and ask me about them.

**When you sign your name, this means that you agree to participate in the study.**

**I will keep your personal matters a secret. Not disclosed to anyone.**

**You have read and understood the details of the project.**

**☺ If you are willing to participate in this project, Please sign.**

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**☹** **If you are not willing to join this project,** **Please sign.**

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_