***Sample Interview Consent Form****This is only a sample to give you an idea of how you might want to design your information and consent form. Try to keep your consent form to one page or the front and back of one page. Your subjects should each get a copy of the consent to keep.*

**TITLE OF STUDY:** *Educational Practices and Student Learning in Selective Liberal Arts Colleges*

**STUDY INVESTIGATOR(S):***Faculty Advisor: Professor Joseph Genius, Department of …., phone, email  
Research Student: Jane Smart, Department of …., phone email*

**Invitation to Participate & Study Description**

*I am name , a student in Department/course.*

*As a student at Kenyon College, you are invited to participate in a research study about ??????????????????? By agreeing to participate in this study, you are agreeing to be interviewed. The interview will take about an hour to complete and will be recorded.*

**Risks & Benefits**

*This study does not involve any type of physical risk; you will be asked to answer questions about …... Although this study is not designed to help you personally, the information you contribute will help us better understand …... The results of this project will be ………….. The results of this study will also be made available to interested research participants. Respondents are welcome to contact any one of the study investigators for more information.*

**Confidentiality**

*The information you provide will be kept strictly confidential. To protect your privacy, your responses to the interview questions will only be identified with a code number and will be kept by Professor Genius at Kenyon College. All recordings will be destroyed after transcription. All other project materials will be kept for three years after the study has ended, and will be accessible only to members of the research team. Your name will not be associated with your study materials or with the research findings. The information obtained in this study may be published in scientific journals and/or presented at professional meetings, but only group patterns will be described and your identity will not be revealed.*

**Your Right to Refuse or Withdraw**

*The decision to participate in this research project is entirely up to you. You may refuse to take part in the study without affecting your relationship with anyone or any office at Kenyon College. You may also choose not to answer any question posed. Your decision will not result in any loss or benefits to which you are otherwise entitled.*

**Your Right to Ask Questions**

*You have the right to ask questions about this study and to have those questions answered by any of the study investigators before, during or after the research.* If you have any other concerns about your rights as a research participant that have not been answered by the investigators, you may contact the Kenyon College Institutional Review Board administrator, IRB@kenyon.edu.

**Consent**

Your signature below indicates that you have decided to participate voluntarily in this study and that you have read and understood the information provided above. You will be given a copy of this form to keep.

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Participant (PLEASE PRINT): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ I agree to be audio/video recorded (add only if applicable)