Protocol ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IRB Number: \_\_\_\_\_\_\_\_\_\_\_\_\_ PI: \_\_\_\_\_\_\_\_\_\_\_



|  |  |  |  |
| --- | --- | --- | --- |
| **Subject ID:** |  | **Subject Initials:** | \_\_ \_\_ \_\_ |
| **ICF Version:** | v.  | **ICF Approval Date:** |  |
| **Date of Subject Signature:****(DD/MMM/YYYY)** |  | **Time Subject Signed:****24 hour Clock** | : |
| **Is this the most recent IRB Approved ICF version?** | Stop  Yes No  |
| **Verification that no research activity has taken place before the subject has signed the consent:** | Stop  Yes No  |

|  |
| --- |
| **Person Obtaining consent should check below to indicate completion of each task for the Informed Consent Process:** |
|  | The subject was given the opportunity to read over the consent |
| Stop | The subject had the opportunity to ask any questions about the research being conducted and their involvement |
| Stop | The consent was obtained in the subject’s language |
|  | The subject verbalized their understanding of the informed consent |
| StopStop | The subject was reminded they can withdraw at any time without fear of repercussion |
| Stop | A copy of the signed consent was given to the subject |
| StopAdditional Comments: |
| **Printed Name of Person Obtaining Consent:** |  | **Date:** |
| **Signautre of Person Obtaining Consent:** |  |