

[All instructions and comments are in [] and yellow, and examples are in italics. Remove these from actual consent document.]

[The language used in this form should be at approximately the 6th grade level or lower so that it can be used with individuals who may have limited reading skills. You can check the reading level of your consent form within Word (<http://office.microsoft.com/en-us/word-help/test-your-document-s-readability-HP010148506.aspx>).]

YOUTH ASSENT FORM

TITLE:

This form may have some words that you do not know. Please ask someone to explain any words that you do not know. You may take home a copy of this form to think about and talk to your parents about before you decide if you want to be in this study. [Rewording may be necessary for committed residents.]

What is this study about?

The purpose of this research study is to [Briefly fill in purpose of the study using language a young person would understand].

You are being asked to participate in this study because you [Briefly fill in why this person is in your sample.]

What will happen to me if I choose to be in this study?

In this study you will be asked to:

[Describe what participation in this study will entail for participants, including how long the study will last and approximately how many participants will participate in this study. *Example: In this study you will be asked to go to two group meetings. Each meeting will be about an hour. In each meeting, you will be in a group with 8 or 9 other teenagers. In the first meeting, you will be asked to talk about . . .*]

[Provide examples of the types of questions you will be asking/content that will be discussed. *Example: In the second meeting you will be asked to talk about . . .*]

[Describe what and how information will be collected. *Example: The meetings will be tape recorded so we are sure to get everyone's ideas. We will not record names on the tape.*]

If you decide to be in this research study, you will be asked to sign this form. Do not sign the form until you have all your questions answered, and understand what will happen to you.

What might happen if I am in this study?

[Possible psychological risks or discomforts must be noted and how they will be handled. *Example: Sometimes talking about these things makes people upset. You do not have to talk*

about anything you do not want to talk about. You can leave the group at any time. If you do become upset, the people running the group will help you.]

What do I get if I am in this study?

[You only need to have this section if you are providing something to the participants. If you are paying for participation or giving gifts you must be very specific as to the amount and how it will be paid. *Example: You get a \$5.00 gift certificate to the mall for each time you come to the group.*]

[In accordance with 45 CFR 46 Part C.] Being in this study will not affect how you are treated in either the juvenile or adult justice systems. It will not help or hurt your sentencing, length of stay, or parole.

Will you tell anyone what I say?

We will not tell anyone the answers you give us. We will not share your answers with your teachers, parents, friends, or [Add appropriate DJJ staff. *Example: your probation officer.*]. However, other members of your group will know what you say.

What we find out in the study and this signed form may be looked at or copied by the group paying for this study [only include sponsor if appropriate], the place where we work ([name of university or organization]), or the Virginia Department of Juvenile Justice (DJJ). [DJJ must be listed in accordance with 45 CFR Part C unless other arrangements have explicitly been agreed upon by the researcher and DJJ].

If you tell us that someone is hurting you, or that you might hurt yourself or someone else, the law requires us to let people in authority know so they can help you.

[In accordance with 45 CFR 46 Part C.] We will not tell anyone that you are a juvenile offender, but if you have to go to adult jail or prison, we cannot promise that your adult placement will be kept secret.

If we talk about this study in speeches or in writing, we will never use your name.

Do I have to be in this study?

You do not have to be in this study. If you choose to be in the study you may stop at any time. No one will blame you or criticize if you drop out of the study. You will still get all the same treatment, services, and privileges from DJJ.

[In accordance with 45 CFR 46 Part C.] If you are detained as a juvenile or an adult [do not include "a juvenile or" if your target population is committed youth] during this study, you may not be able to continue.

If you want to stop the study before it is over, [Insert any consequences of a subject's decision to withdraw from the research and procedures for orderly termination of participation by the subject.]

Questions

If you have questions about being in this study, you can talk to the following persons or you can have your parent or another adult call: [Adjust wording for a correctional setting.]

[List the name of the contact person and his/her contact information here.]

Do not sign this form if you have any questions. Be sure someone answers your questions.

Assent:

I have read this form. I understand the information about this study. I am willing to be in this study.

Youth Participant Name (Printed)

Youth Participant Signature

Date

Name of Person Conducting Informed Assent Discussion (Printed)

Signature of Person Conducting Informed Assent Discussion

Date

Principal Investigator Signature

Date