Educational Intervention Study Consent Form
Study Title
Principal Investigator
Purpose of the Study
Procedures
1. 2. 3.
Benefits
Risks
Confidentiality
Voluntary Participation
Contact Information
Consent Statement
I have read and understood the information provided above. I have had the opportunity to ask questions about the study and my participation. I voluntarily agree to participate in this study.
Participant Name
Participant Signature
Date
Investigator Name
Investigator Signature

Date