

# Vulnerable Populations Research Informed Consent Waiver Form

Study Title

Principal Investigator

Department / Affiliation

## Waiver Request Justification

Provide a detailed justification for the request to waive informed consent for this research involving vulnerable populations.

## Description of the Study

Briefly describe the purpose, procedures, and targeted vulnerable population(s).

## Risk Assessment

Describe the risks (if any) to participants and how they will be minimized.

## Confidentiality Measures

Outline how participant privacy and data confidentiality will be maintained.

## Other Relevant Information

Add any other information pertinent to this waiver request.

## Declaration

I confirm that the information provided in this form is accurate and complete to the best of my knowledge.

Principal Investigator Signature

Date