

# Parental Consent Form for Minors in Educational Research

Research Study Title

Principal Investigator(s)

Institution/Organization

Purpose of the Research

Procedures

Risks and Discomforts

Benefits

Confidentiality

Voluntary Participation

Contacts for Questions

## Parental Consent

I have read the information provided above. I have had the opportunity to ask questions and all of my questions have been answered to my satisfaction. I voluntarily agree to allow my child to take part in this research study.

Minor's Name	
Minor's Date of Birth	

Parent/Guardian Name

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Signature

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Date

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Investigator Name

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Signature

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Date

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