



SHAHEED MOHTARMA BENAZIR BHUTTO INSTITUTE OF TRAUMA

Department of Research & Development

IRB ASSENT TO PARTICIPATE IN RESEARCH FOR AGE UP TO 12 YEARS (SAMPLE)

Project Information

Note for Researchers:

Use the following headings exactly as they are. Provide clear, concise, and easy-to-understand descriptions specific to your study. Use language that is age-appropriate, avoids technical jargon, and directly addresses the participant.

Why Are We Doing This Study?

Explain the purpose of the study in simple terms. Focus on the goal and how the research could benefit people in the future.

Example:

"We are doing this study to learn more about how children recover after injuries so we can help them heal better and faster."

Why Am I Being Asked to Be in This Study?

Describe why the participant was chosen for the study in a relatable way.

Example:

"You are being asked to be in the study because we want to learn from children your age who have had a similar experience."

What If I Have Questions?

Let participants know they can ask questions at any time and provide contact details for follow-up questions.

Example:

"If you have questions now or later, you can talk to [researcher's name] at [phone number] or ask anyone in the study team."

What Will Happen if I Am in the Study?

Provide a step-by-step description of what participants will do during the study, using straightforward language. Include the time commitment.

Example:

"If you join the study, you will need to visit the hospital three times so we can check how you are doing and ask you a few questions. Each visit will take about an hour."

Will It Uncomfortable?



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We want you to know that some things in the study might be uncomfortable. For example, [mention in simple words, e.g., “if we need to take a small amount of blood with a needle, it might feel like a quick pinch and leave a small mark”]. If you ever feel uncomfortable, please tell us.

Signature Section by attendant (Specify relation)

If you want to be in this study, please sign or print your name below.

I, _____ (Print your name), would like to be in this research study.

If the child is unable to read/write, verbal assent was received: Yes ☐ No ☐ Not Applicable ☐

Name of Participant: _____

Participant's Thumb Print: _____ **Signature of Participant:** _____

Date: _____

Name and Signature of Person Obtaining Assent: _____

Date: _____

Witness Name: _____ **Signature:** _____

Date: _____