*This document is a sample for researchers to use as a guide in developing their study materials. Instructions to the researchers are denoted within square brackets in italics, and should be deleted/replaced before uploading the application to the research ethics application.*

I have read the information letter concerning the research project entitled ***[insert project title]*** conducted by ***[insert researcher names]*** of the Department of ***[insert department name]*** at the University of Waterloo. I have had the opportunity to ask any questions and receive any additional details I wanted about the study.

Your identity will be confidential. I am aware that permission may be withdrawn at any time without penalty by advising the researchers.

This study has been reviewed and received ethics clearance through a University of Waterloo Research Ethics Board (REB ***[####]***) ***[Replace #### with the file number that is listed at the top of your ethics application].***If you have questions for the Board contact the Office of Research Ethics, at 1-519-888-4567 ext. 36005 or reb@uwaterloo.ca.

For all other questions contact ***[insert researcher name and contact information].***

Child's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child's Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender of Child: \_\_\_ Male   \_\_\_ Female

Permission Decision: \_\_\_\_ Yes - I would like my child to participate in this study

  \_\_\_\_ No - I would not like my child to participate in this study

Signature of Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_