*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.*

**Project Title:**  ***[insert title of project]***

**Principal Investigator: *[insert name and department]***

**Ext. Number: *[insert ext.]***

**Student Investigator: *[insert name and department]***

**Contact:**  ***[insert UW email address]***

During the debriefing session, I was given an explanation as to why it was necessary for the researchers to disguise the real purpose of this study. I was informed that having full information about the actual purpose of the study might have influenced the way in which I responded to the tasks and this would have invalidated the results. Thus, to ensure that this did not happen, some of the details about the purpose of the study initially were not provided (or were provided in a manner that slightly misrepresented the real purpose of the study). However, I have now received a complete verbal and written explanation as to the actual purpose of the study.  In addition, I have had an opportunity to ask any questions about this and to receive acceptable answers to my questions.

I have been asked to give permission for the researchers to use my data (or information I provided) in their study, and agree to this request. I am aware that I may withdraw this consent by notifying the Principal Investigator of this decision.

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](mailto:reb@uwaterloo.ca).

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

**Participant's Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Participant's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Witness’ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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