**Minor Assent Form**

**Minor Assent – Middle School Age**

We are asking you to be in this study about please fill in. We have told your(parents/guardian) about the study and (he/she/they) said that you could be in it.

You will be asked to please explain.

Your being in the study is voluntary. The word voluntary means that you do not have to do it if you do not want to. You also can stop being in the study at any time.

Is it okay if I record what you do and say?

Circle one of the following: **Yes** or **No**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Printed Name of Child |  |  |
|  |  |  |
|  |  |  |
| Signature of Child (if possible) |  | Date |
|  |  |  |
|  |  |  |
| Printed Name of Person Obtaining Assent |  |  |
|  |  |  |
|  |  |  |
| Signature of Person Obtaining Assent |  | Date |

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| --- |
| **THIS RESEARCH PROJECT HAS BEEN REVIEWED & APPROVED BY THE TEXAS A&M**  **UNIVERSITY—KINGSVILLE INSTITUTIONAL REVIEW BOARD FOR THE PROTECTION OF HUMAN SUBJECTS. FOR QUESTIONS, COMPLAINTS, OR CONCERNS ABOUT THE RESEARCH, YOU MAY CONTACT THE OFFICE OF RESEARCH AND GRADUATE STUDIES BY PHONE AT 361-593-2677, OR BY EMAIL AT**  [ResearchCompliance@tamuk.edu](mailto:ResearchCompliance@tamuk.edu) |
| **Protocol #: 0000-000 / 00000** |