Form of Informed and Voluntary Consent to Participate in Research

Data

										Date	•••••	/	• • • • • • • • • • • • • • • • • • • •	••••/ ••••	•••••	•••
	M	y name	is					, a	ged	у	ears	old,	now 1	iving	at tl	ne
address	no)	road/s	treet.				sub-	dist	rict/tamb	on					
district/	am	phur			province		P	ostal	l co	de		Tel.	No.:			
	,				r											
	I	hereby	express	my	consent	to	participate	as	a	subject	in	the	researc	ch p	roject	(1) [
entitled																

In so doing, I am informed of the research project's origin and purposes; its procedural details to carry out or to be carried out; its expected benefits and risks that may occur to the subjects, including methods to prevent and handle harmful consequences; and remuneration, and expense. I thoroughly read the detailed statements in the information sheet given to the research subjects. I was also given explanations and my questions were answered by the head of the research project.

I therefore consent to participate as a subject in this research project (2).

On the condition that I have any questions about the research procedures, or on the condition that I^(*) suffer from an undesirable side effect from this research, I can contact (Indicate the name of the person in charge who is 24-hour ready for contact by phone or pager.).

On the condition that I^(*) am not treated as indicated in the information sheet distributed to the subjects, I can contact the Chair of Mahidol University Institutional Review Board (MU-IRB) at the office of MU-IRB, Research Administration Division, Office of the President, Mahidol University, Tel 66-2-8496223-5, Fax 66-2-8496223.

I am aware of my right to further information concerning benefits and risks from the participation in the research project and my right to withdraw or refrain from the participation anytime without any consequence on the service or health care I am to receive in the future. I consent to the researchers' use of my private information obtained in this research, but do not consent to an individual disclosure of private information. The information must be presented as part of the research results as a whole.

I thoroughly understand the statements in the information sheet for the research subjects and in this consent form. I thereby give my signature.

	Signature Participants/ Proxy/ Date
	()
	Signature Person in Charge of Informing and Requesting a Consent/ Head of
	() Research Project/ Date
	In case that the participant is not literate, the reader of all the statements for the participant is (Mr.
/Mrs./N	Ms), who gives his/her signature as a witness.
	SignatureWitness/Date
	()

Note: If the participant is a minor (under 18 years old), the sentences with superscripts (1) and (2), and the pronoun, "I" marked with a star (*), must be replaced with the followings:

- (1) I hereby express my consent to my child's participation as a subject in the research project.
- (2) I therefore consent to the participation of the child under my guardianship as a subject in this research project.
 - * The child under my guardianship