**Exempt Consent Guidance**

The elements listed below should be included in the consent form used for Exempt research. This is to ensure that the participants are well informed and that effective, voluntary consent is obtained. While Exempt projects are not held to the regulatory requirements, the ethical principles from the [Belmont Report](https://www.hhs.gov/ohrp/regulations-and-policy/belmont-report/read-the-belmont-report/index.html#xbasic) of Respect for Persons (Autonomy), Beneficence, and Justice still apply. Our template on the following page will cover these elements and provide a basic structure that can be used for a consent form or script; feel free to add any other information and modify it to fit your research. Consent for Exempt research can be obtained in written, verbal, and/or online formats without the need for a Waiver.

If you have any questions, please contact us: [irb@wsu.edu](mailto:irb@wsu.edu)

**Basic Elements:**

1. A statement that the study involves research;
2. An explanation of the purposes of the research;
3. The expected duration of the subject's participation;
4. A description of the procedures to be followed;
5. Identification of any procedures that are experimental (if applicable);
6. A description of any reasonably foreseeable risks or discomforts to the subject (e.g. breach of confidentiality, minor psychological discomfort/distress, etc.);
7. A description of any benefits to the subject or to others that may reasonably be expected from the research; (**NOTE**: It is very common that the research does not provide direct benefits to the subjects, especially in Exempt research. If that is the case, please include a brief statement to clarify this. Please also note that compensation and incentives are NOT considered benefits.)
8. A statement describing the extent, if any, to which confidentiality of records identifying the subject will be maintained;
9. An explanation of whom to contact for answers to pertinent questions about the research and research subjects' rights, and whom to contact in the event of a research-related injury to the subject;
10. A statement that participation is voluntary, refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled, and the subject may discontinue participation at any time without penalty or loss of benefits to which the subject is otherwise entitled;
11. A statement confirming Exempt certification. For example: “This study has been certified as Exempt by the WSU Human Research Protection Program.”

**[See next page for the Template]**

**WASHINGTON STATE UNIVERSITY**

[Insert name of department/college here]

**Research Study Consent Form**

**Study Title: [Title as listed on IRB application]**

**Principle Investigator: [Include name, affiliation, phone, and email; repeat for Co-PIs/Co-Is]**

[**Instructions:** *Statements* *in brackets and* *italics* *are instructions or examples. Do not include them in the final version of the information sheet.]*

We are asking you to take part in a research study being done by [*list researcher’s name*] at Washington State University (WSU). Your participation in this study is completely voluntary. You may choose to not answer specific questions and are free to discontinue participation at any time.

If you choose to be in the study, you will complete a [survey/interview/focus group] about [*brief description of survey/interview/focus group topic*]. [*If there are additional procedures, please include that information here*]. This [survey/interview/focus group] will help us learn more about [*briefly describe the purpose of the research*]. The [survey/interview/focus group] will take about [*XX minutes or hours*] to complete. You will be offered [*incentive/compensation information, including amount and type; if no incentive, you can remove this statement*] for participating.

[*Include information regarding any potential risks here and your plans to reduce them; this would include your privacy/confidentiality measures as well*]. We will keep your answers [anonymous/confidential] and will not share your information with anyone outside the research team. You can skip questions that you do not want to answer or stop at any time. This research is not likely to provide direct benefits to subjects.

Questions? Please contact [*researcher’s name*] at [*contact info*]. If you have questions or concerns about your rights as a research participant, you can contact the WSU Human Research Protection Program (HRPP) at [irb@wsu.edu](mailto:irb@wsu.edu). This study has been certified as exempt by the WSU HRPP.

If you would like to participate in this study, [please fill in your name and date below] OR [click the “Agree” button to continue to the survey] OR [please confirm verbally]. [*This signature or “Agree”/”Disagree” area can follow whatever format best suits your study. Qualtrics, REDCap, and other means of obtaining consent will vary.]*