

Student Consent Form for Research

Student Information:

- Name: _____
- Grade/Class: _____
- Contact Information: _____

Research Details:

- Title of Research: _____
- Researcher Name: _____
- Purpose of Research: _____
- Participation Date(s): _____

Consent Statement:

I, [Student/Parent Name], agree to allow my participation in the above-mentioned research study. I understand the nature, benefits, and potential risks involved.

Table of Research Activities:

Activity	Time Required	Location	Supervised By
Survey Participation			
Group Discussion			
One-on-One Interview			
Data Collection			

I understand my participation is voluntary, and I may withdraw at any time without penalty.

Signatures:

Student: _____ **Date:** _____

Parent/Guardian: _____ **Date:** _____