Participant informed Consent Form

Institute Ethics Committee

National Institute of Technology Meghalaya

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Project number:

Participant identification number for trial:

Title of the project:

Investigator(s) details:

I have carefully read/explained in detail to me the contents of the Participant Information Form (dated: ). The purpose of the research, benefits of the research, potential risks of the research, and other relevant information of the research have been explained to me in detail. I have fully understood the information provided in the form. I understand that that my participation is a requirement to conduct the research and I am free to withdraw at any time without giving any reason. The information about me for my participation in this research may be collected. I give my consent to take part in the research.

|  |  |
| --- | --- |
| **Participant**: |  |
| Signature/Thumb Impression:  |  |
| Name:  |  |
| Son/Daughter/Spouse of:  |  |
| Address:  |  |
| Contact No.  |  |
| Date: Place:  |  |
| This is to certify that the consent has been given in my presence. |
| **Principal Investigator**: |  |
| Signature:  |  |
| Name:  |  |
| Address:  |  |
| Contact No.  |  |
| Date: Place:  |  |
| **Witness – 1**: | **Witness – 2**: |
| Signature:  | Signature:  |
| Name:  | Name:  |
| Address:  | Address:  |
| Contact No.  | Contact No.  |
| Date: Place:  | Date: Place:  |

Participant Information Form

Institute Ethics Committee

National Institute of Technology Meghalaya

**EC Ref. No.\*** *(For office use):*

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| 1. | Title of the project:  |
| 2. | Investigator(s) details:  |
| 3. | Aims and methodology of the project:  |
| 4. | Details of funding agency and fund allocation: |
| 5. | Expected duration of the subject participation:  |
| 6. | Benefits expected from the research to the subject or to others:  |
| 7. | Risks involve and safety measure(s):  |
| 8. | A statement specifying to maintain confidentiality:  |
| 9. | Provision of treatment of subject for research related injury: |
| 10. | Compensation to subject for disability or death from injury:  |
| 11. | Freedom of subject to participate/withdraw from research:  |
| 12. | Any other relevant information:  |