**Consent Approval Date:** \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ **Consent Expiration Date:** \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

**Informed Consent Checklist *(****√= item completed*)

* **Print** name of PI/Designee who obtained consent from the participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Informed consent was obtained ***prior*** to participation in this study. **Time of Consent:** \_\_\_\_: \_\_\_\_\_\_\_ am/pm
* The informed consent was reviewed in its entirety with the participant and his or her parents/legal guardians
* Adequate time was given for consideration of study participation.

 -------------------------------------------***Modify this section to fit your study*** *-------------------------------------------------*

* **Future use for stored samples and data discussed with participant.**
	+ Participant’s response to ***future use*** of data *(****Check One****)*:
		- Yes
		- No
	+ Participant’s response to ***storage of samples for future use*** *(****Check One****)*:
		- Yes
		- No

-------------------------------------------***Modify this section to fit your study*** *-------------------------------------------------*

**Signature box sections are fully executed:**

* + ***If applicable*: Participant Signature Box Section** c**ompleted** (*must be completed to the fullest extent*)**:**
		- **N/A-**Participant is a minor. Consent obtained from parent/legal guardian(s).
	+ **1st Parent/Guardian Signature Box completed** (*must be completed to the fullest extent*)**:**
		- Consent obtained from:
			* Mom
			* Dad
			* Grandma/Grandpa *(must be legal guardian)*
			* Aunt *(must be legal guardian)*
			* Other *(must be legal guardian):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
	+ **2nd Parent/Guardian Signature Box completed** (*must be completed to the fullest extent*)**:**
		- Consent obtained from:
			* Mom
			* Dad
			* Grandma/Grandpa *(must be legal guardian)*
			* Aunt *(must be legal guardian)*
			* Other *(must be legal guardian):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
			* **2nd Parent/Guardian consent could NOT be obtained because parent/guardian is:**
				+ Deceased
				+ Incompetent
				+ Unknown
				+ Not reasonably available (*list reason why*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **PI/Designee** **Signature Box completed: (***must be completed to the fullest extent***)**
	+ ***If applicable*:** Did the minor participant provide assent? **Yes No**
		- **If No** check off reason why:
			* **Too young**
			* **Not mentally competent to provide assent**
			* **Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* A copy of the **fully executed** consent/assent document(s) were given to the Participant(s) and parent/legal guardian(s).

**Additional Details of Consent/Assent Process:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PI/Designee Signature Date**