**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**