When research involves the collection of anonymous data via a survey the researcher is not required to obtain written evidence of consent however, he or she must provide participants with appropriate information on the study. The researcher may develop a document that follows the University of Manitoba Bannatyne Campus consent template with the signature section deleted or provide an explanatory letter/e-mail in lieu of a consent template. This document should include the consent disclosure statements listed below.

When participants are directed to conduct the survey via an internet site (e.g. survey monkey) a consent disclosure statement should precede the survey.

1. A brief statement that the survey is part of a “research study”.

2. A brief statement regarding the purpose of the research and who is performing it.

1. A statement regarding research procedures. Explain that the study involves answering a series of questions and will take a specific length of time that should be specified e.g. 15 minutes.
2. A statement regarding any foreseeable risks. These might include such things as tiring from answering questions, being asked sensitive questions, etc. If there are no risks, this should be indicated.
3. A statement regarding anticipated benefits. Describe the potential benefits of the knowledge to be gained and any benefits for participants. If there are no benefits to participants, this should be indicated.
4. A statement that participation is voluntary. If the study concerns patients or potential patients, it should state that failure to participate will not adversely affect the care of the participant.
5. A statement regarding provisions to maintain the confidentiality of the data. If conducting a survey on-line, indicate whether the researcher will be able to track the respondent’s e-mail address.
6. Willingness of the participant to complete the survey will serve as adequate evidence of informed consent.
7. Add a ‘version date’ to either the top or bottom of the survey.

*These templates are designed to assist in the development of a consent disclosure statement for an on-line survey tool or mail returned survey. Please review for appropriate text and revise as necessary.* ***Red bold font provides instructions with respect to required text.***  *Blue text provides instructions on site specific information to be included. Prior to submitting please ensure formatting is corrected with the template and a version date in placed in the footer of the document*. *Please remove all instructions and the U of M template title and version prior to submitting.*

***University of Manitoba, Bannatyne Campus Research Ethics Boards (May 2013) On –line Survey Consent Disclosure Template.***

***Insert name of Study and Organization***

Thank-you for accessing the name of survey or study on the internet. Introduce organization or researcher who is conducting survey.

This survey is being conducted todescribe purpose of study/online evaluation, etc.

Your feedback will be collected through an online survey which will ask you a series of questions and should take about state time frameto complete.

Your participation on this line survey is completely voluntary. You are not required to provide any personalinformation such as your name, address or telephone number, and you don’t have to answer any questions you don’t want to. The survey system will not record your e-mail address or IP (Internet protocol) address.

***(If applicable-***  When an incentive is provided the processes with respect to this must be described in the consent disclosure and how this may be done such that the responses will not be linked to their acceptance of this offer).

The risks of participating are low. (*Outline any possible risks which may arise. E.g. Loss of confidentiality, request to complete sensitive questions that may be upsetting, etc.).*

***( If applicable)*** If you agree to participate in the survey, please note that you must complete the survey in one sitting (in other words, the system won’t let you save your survey responses and return to complete them later.

***(If applicable)*** if you agree to participate in the survey, you will be asked to create an account which will allow you to save your responses and return to complete the survey in more than one sitting.

***(If applicable)*** Also, please note that when you submit your response. You will **not** be able to withdraw them as we cannot link the survey responses back to you.

Your participation(or feedback)is important to us and will help us describe how responses will be used*.* If you have any questions about this survey study, please do not hesitate to contact indicate name and titleat indicate phone number or e-mail address*.*

***(If applicable)*** The study is funded by the state name of funder.

This study has been approved by the University of Manitoba Health Research Ethics Board.

By continuing on and completing the on-line survey you are consenting to participate in the on-line survey. **Or**  I Consent to participate in this survey ○ Yes ○ No

***University of Manitoba, Bannatyne Campus Research Ethics Boards (May 2013) Mail Returned Consent Disclosure Template.***

***Insert name of Study and Organization***

Introduce organization or researcher who is conducting survey*.* You are being asked to consider participation in a survey study because provide rational why individual or organization is selected to participate*.*

This survey is being conducted todescribe purpose of study/online evaluation, etc.

Your feedback will be collected through completion of a survey (if applicable, a series of questionnaires) which will ask you a series of questions and should take about state time frameto complete.

Your participation is completely voluntary. You may only answer the questions you feel comfortable answering.

The risks of participating are low (***Outline any possible risks which may arise. E.g. Loss of confidentiality, request to complete sensitive questions that may be upsetting, etc.).***

***(If applicable- When responses are anonymous i.e. no way to link responses to individual)*** You are not required to provide any p**ersonal information such as your name, address or telephone number**. Your responses will be anonymous as we will not know who has completed the survey or questionnaire(s) and it will not be linked to any other information about you. (***NOTE: if responses are coded or linked to possible identifying information or subsequent follow-up is request this must to be outlined).***

***(If applicable, outline any Incentives for completion of the survey***)– Upon completion of the survey you are eligible to receive a state what incentive.Please provide your name and mailing address on the separate page in the package in order to receive the state what incentive*.*  . This information will be handled separately for the purposes of sending you the token of appreciation and will not be linked to study responses.

Your participation *(or feedback)* is important to us and may help us describe how responses will be used.

If you have any questions about this survey study, please do not hesitate to contact *indicate name and title* at *indicate phone number or e-mail address.*

***(If applicable, state funding source)*** The study is funded by the state name of funder*.*

This study and survey has been approved by the University of Manitoba Health Research Ethics Board.

Completion and return of this survey implies your consent for the purposes stated above.