**Faculty:** Choose your faculty.

**Department:** Click or tap here to enter Dept.

**Date:** Click or tap to enter a date.

**Research Title:** Click or tap here to enter research title.

Dear Participant,

I am Click or tap here to enter your name from Yarmouk University. I will conduct a study oftap to write Research Title. So, I hope you agree to participate in my research previously explained.

‎ The study contains of the following purposes/activities:

* Click or tap here to enter Nature of activities that the participant will undertake.
* Click or tap here to enter duration of the study and the duration of the participant's activities.
* Click or tap here to enter the researcher's role in observing that participants during activity time.
* Click or tap here to enter whether the sessions will be recorded or not and how.

Please note that no one can reveal the collected data except Click or tap here to enter persons who will have access to data (you, Your supervisor, etc.) .

At the end of the study, a collective summary of the participants’ results will be provided, so any parent can access these results if they so wish. If you would like to receive the result's summary, please indicate this at the end of this form with your email address. If you do not wish to provide us with your email, you can access the results summary of the study through the following website: www. edu.yu.jo

Please determine if you wish to participate in this study or not, by choosing the suitable statements:

Experiment title: Click or tap here to enter research title.

|  |  |
| --- | --- |
|  | **1.** I've seen the sheet that includes information about the current experiment |
|  | **2.** I was given the opportunity to ask the questions I wanted, and they were clearly answered |
|  | **3.** I understand that my participation in this experiment is voluntary, and that I can withdraw at any time without providing any justification. |
|  | **4.** I received enough information about the experiment |
|  | **5.** I agree to participate in the above mentioned experiment |

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Participant’s signature Participant’s four parts name Researcher’s signature Researcher’s name

**For inquiries, please contact:**

**Researcher's name:** Click or tap here to enter your name

**Researcher's mobile number and e-mail:** enter a contact number**,** enter your email address

**Supervisor's name in relation to higher education students:** enter name of the supervisor (if applicable)

**Sponsor agency:** tap here to enter sponsor agency