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# COLLEGE OF ST. BENEDICT/ST. JOHN’S UNIVERSITY

**[Title of Study]**

**INTRODUCTION**

As a student at the College of Saint Benedict and Saint John’s University (CSB/SJU), you are invited to participate in a research study investigating the relationship between gender, anxiety, and attitudes towards exercise of college-aged students. [Researcher Name] (CSB student) is conducting the study under the supervision of [Faculty advisor Name] (faculty member department). Please read this form and contact the researcher to ask any questions you may have.

**BACKGROUND and PROCEDURES**

Lack of exercise in college students is related to an increased risk for XYZ health issues. Understanding the relationship between gender and attitudes towards exercise could help identify underserved or at risk groups on campus. If you agree to participate in this study, you can continue to the next page of this online survey by clicking next. You will be asked basic demographic information, your self- identified gender, 7 questions on anxiety, and 7 questions that measure attitudes towards exercise. Please answer all the questions as honestly as possible. This research study will take about 15 minutes.

**RISKS/BENEFITS**

Risks

This study has one minimal risk. Some of the questions about anxiety may cause you to become anxious or stressed. If you do become anxious or stressed, you should immediately stop your participation in the survey. We also recommend that you contact the CSB/SJU Counseling and Health Promotion at 320-363-5605.

Benefits

There are no direct benefits to this study [or list benefits].

**CONFIDENTIALITY**

All of your responses will be anonymous, and no responses will be linked to your name. The records of this study will be kept private. Research records will be kept in a password protected file on the M drive of the researcher. Only the researcher and faculty advisor will have access to the records. In any reports or public presentations, no information will be included that would make it possible to identify you as a participant.

**VOLUNTARY NATURE OF THE STUDY**

Your participation in this research study is voluntary. You may stop participating at any time without penalty or costs of any kind. Your decision whether or not to participate will not affect your current or future relations with the College of Saint Benedict or Saint John’s University.

**CONTACTS AND QUESTIONS**

[Student Name] (student email) is the primary researcher in this study. If you have questions, you may contact the primary researcher by email or by phone at (320) 555-5555 or the faculty advisor, [Faculty advisor name], by email at [their email@csbsju.edu](mailto:their%20email@csbsju.edu) or by phone at (320) 363-0000. If you have additional questions, you may also contact the chair of the CSB/SJU Institutional Review board at [irb@csbsju.edu](mailto:irb@csbsju.edu). A copy of the informed consent may be provided to you for your own records upon request.

**STATEMENT OF CONSENT**

I have read the above information. I have asked questions and have received answers. I consent to participate in the research.

*I attest that:*

* *I am at least 18 years of age.*
* *I am an enrolled student at the College of Saint Benedict and Saint John’s University*

I have read this form, understand it, and agree to participate in this study. (check box on form to indicate consent). If you choose not to participate in this study, please click the X in the upper right corner or your web browser to exit this page.

*Second Page [begin survey]*

# College of Saint Benedict/St. John’s University

**Title of Project**

**INTRODUCTION**

You are invited to participate in this research study investigating (what you are investigating with research). This study is being conducted by (faculty members and researchers involved with the project). You have been selected to participate because you enrolled in one or more health science courses between Fall 2016 and Spring 2018. Please read the following form and direct any questions or concerns to [primary researcher name and title] (researcher email) at [xxxx@csbsju.edu](mailto:xxxx@csbsju.edu) .

**BACKGROUND and PROCEDURES**

The purpose of this study is to [your purpose]. If you agree to be in this study, we would ask you to participate in a small focus group of about 5 students. In the focus group you will be asked about your thoughts on [insert pertinent info]. The focus groups will be audio recorded. No Health Science department faculty members will have access to the audio recordings, so no health science faculty members will know how you answered the questions. Health Science faculty members will only have access to the audio transcriptions in which your responses will be coded, such as “Student A said…”. The focus group should take no longer than 45 minutes.

**RISKS/BENEFITS**

There is one risk involved in participating in the focus group. You may feel uncomfortable answering questions about [pertinent info]. If you feel uncomfortable answering questions, you may stop participating at any time. A non-Health Science department faculty member will lead the focus group, so no Health Science faculty member will have access to your responses.

Benefits may include engaging in conversation about how the Health Science department might improve their lab space for all students. You will also receive a $20 Target gift card for your participation.

**CONFIDENTIALITY**

The focus group will be audio recorded on a Health Science department iPad, and after transcription the audio will be deleted. The focus group leader will edit the audio transcription and all participants will be identified by a code such as “Student A”. No Health Science faculty members will have access to the original audio recording and will not be able to identify any participants. The transcription will be stored on a password protected drive. In any presentations or publications, no one will be able to identify you as a participant.

**VOLUNTARY NATURE OF THE STUDY**

Your decision to participate in the study is completely voluntary. You reserve the right to terminate participation at any time without penalty. Your decision to participate or not participate will not affect your relationship with the Health Science Department or the College of Saint Benedict/Saint John’s University.

**CONTACTS/QUESTIONS**

The researchers for the present study are [list researcher names and email addresses]. You may contact any of the researchers at any time with questions about the study. Questions may also be directed to the IRB chairperson at [irb@csbsju.edu](mailto:irb@csbsju.edu).

**A copy of this form will be provided to you for your records.**

**STATEMENT OF CONSENT**

**I have read the above information and received answers to my questions. I attest that I am at least 18 years old and I agree to participate in the study.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

**CONSENT TO BE AUDIO RECORDED**

**I have read the above information. I consent to having my responses recorded on a digital audio recorder and I understand that my responses will be deleted immediately upon transcription.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

# COLLEGE OF ST. BENEDICT/ST. JOHN’S UNIVERSITY

**Dynamic versus Movement prep warm-up: The effect on jump landing mechanics and agility in female high school basketball players.**

As a member of the [Name of team] Basketball team you are invited to participate in a research study examining the effects of two different warm- ups on your ability to jump off a box, land, and then jump as high as possible as well as your ability to complete an agility test. Please read this entire form and ask any questions you may have before agreeing to participate.

This study is being conducted by:

**[Name]**- CSB Student

**[Name]**- CSB Exercise Science & Sports Studies Professor

**Background Information**

The objective of a warm up is to prepare the body for optimal performance and to decrease the risk of injury. Recently, coaches have started to use a new form of warm up that involves exercises similar to basketball movements. It is called movement prep. The purpose of this study is to examine the differences between a normal warm up and a basketball specific warm up on your ability to land from a jump correctly and complete an agility test.

**Procedures**

If you agree to participate in this study, you will be involved in the following: a first test session, 3 weeks performing a normal warm up, a second test session, 3 weeks performing a basketball specific (movement prep), and a third test session. Each of the three test sessions will occur before practice and take 15 minutes for you to complete.

During each of the three test sessions you will hop off a 30 cm box, land, and then jump as high possible. This test will be videotaped, so that your landing can be scored. However, the videos will only be seen and graded by [name of researcher] and a trained research assistant. The video will be stored on a password protected computer file will also be destroyed immediately after being scored. You will also perform a t-shuttle agility test, in which you will have to move around cones in the fastest time possible. Practice will occur as normal after you have completed the testing session.

At the beginning of each practice all players regardless if they are participating in the study or not will circle their name on an attendance sheet. At the next practice after the first test session, you will complete a 10-15 minute normal warm up prior to practice. You will do this warm up for the next three weeks. The normal warm up will consist of jogging down and back on a basketball court and then performing sport specific stretches and movements (i.e quad stretch, side lunges, high knees, etc). At the end of the three weeks, another testing session will take place that will be exactly like the first testing session.

At the next practice after the second test session, you will complete a 10-15 minute movement prep routine. You will perform the movement prep routine before practice for the next three weeks. The movement prep routine will consist of movements performed with a resistance band, dynamic stretches (i.e lunges, knee hug, etc.), marching and skipping movement patterns, and quick feet drills. At the end of the three weeks, another testing session will take place that will be exactly like the first testing session.

**Risks and Benefits of Participating in the Study**

Because you are exercising there is a chance you might get hurt. However, while playing basketball you can also get hurt. Your doctor said you were healthy enough to participate in athletics, so your chances of getting hurt are low. All prospective participants will have been cleared to participate in high school athletics by turning in a signed physical form. For the jump and T-shuttle agility test, you will get one practice trial to allow for familiarization with each test. If an injury were to occur during testing, basic first aid will be provided and SJU Life Safety will be contacted.

The benefit to the participants will be that you will be performing warm ups that prepare your body for exercise, reduce the risk of injury, and have the potential to induce increases in your athletic performance. The group results will also be shared with the team after the data has been analyzed. Therefore, the coach will know which warm up gives the team the best chance for improvement.

**Confidentiality**

Since all data will be associated with the last four digits of your ID number, no one will know which data is yours. In publishing this study, we will not include any information that will make it possible to identify you. The data will be kept either on a password protected computer or stored in a secure cabinet. Only the researchers will have access to the records. All videotape files will be deleted after two researchers have each scored the jump landing. All scoring will be finished within two weeks after each session.

**Voluntary Nature of the Study**

It is up to you to choose if you want to participate in this study. Your participation or non-participation will not affect your current or future relations with [name of school], the College of St. Benedict, or [name of] basketball team. You may stop your participation in this research study at any time without penalty. If you choose to stop, your data will be deleted immediately.

**Contacts and Questions**

You may ask questions at any time during your participation. If you have questions before or after this study, please contact [name and email] or (555) 555-5555. Dr. Name is supervising this research study and can answer any questions or concerns as well. She can be contacted at [email@csbsju.edu](mailto:email@csbsju.edu) or (320) 555-5555. Her office is located in the [Location of office]. You may also contact the current chair of the Committee on Research with Human Participants by email at irb@csbsju.edu

**You will be given a copy of this form to keep for your records.**

**STATEMENT OF ASSENT**

I have volunteered to participate in this study.

* I have received medical clearance to participate in high school athletics.
* I have no current injuries or conditions that limit my physical activity.
* I know I can stop participating in this study at any time without penalty.
* I know the results may be published, but the data will be presented in a way that does not allow me to be identified.
* I have had the chance to ask questions and I have received answers.

**I have read this form and I understand it. I agree to participate in this project.**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# COLLEGE OF ST. BENEDICT/ST. JOHN’S UNIVERSITY

**Dynamic versus Movement prep warm-up: The effect on jump landing mechanics and agility in female high school basketball players.**

As your daughter is a member of the [Name of team] Basketball team she has been invited to participate in a research study examining the effects of two different warm- ups on her ability to jump off a box, land, and then jump as high as possible as well as her ability to complete an agility test. Please read the entirety of this form and ask any questions you may have regarding it, or the study itself, before agreeing to let her participate.

This study is being conducted by:

**Name**- CSB Student

**Name**- CSB Exercise Science & Sports Studies Professor

**Background Information**

A warm up routine performed prior to exercise is a common practice among individuals participating in a sport. The objective of a warm up is to prepare the body for optimal performance and to decrease the risk of injury. Another form of training that can produce improvements in athletic performance, movement patterns and reduce the risk of ACL injuries is a neuromuscular training program (Meyer, Ford, Brent, & Hewett, 2006a). Recently, exercise professionals started to use a new form of warm up that combines dynamic stretching with aspects of neuromuscular training programs. It is called movement prep. Therefore, the purpose of this study is to examine the effects a dynamic warm up and a movement prep routine have on your daughter’s ability to land from a jump correctly and complete an agility test.

**Procedures**

If you agree to let your daughter participate in this study, she will be involved in the following: a first test session, 3 weeks performing a dynamic warm up, a second test session, 3 weeks performing movement prep, and a third test session. Each of the three test sessions will occur before practice and take 15 minutes for her to complete. During each of the three test sessions your daughter will perform a drop box vertical jump, in which your daughter will hop off a 30 cm box, land, and then jump as high possible. The drop box vertical jump will be videotaped, so that your daughter’s landing can be scored. Your daughter will also perform a t-shuttle agility test, in which your daughter will have to execute different movements around cones in the fastest time possible. Practice will occur as normal after all participants have completed the testing session.

At the beginning of each practice all players regardless if they are participating in the study or not will circle their name on an attendance sheet. All players will do this so that confidentiality of the study participants will be maintained. At the next practice after the first test session, your daughter will complete a 10-15 minute dynamic warm up prior to practice. Your daughter will perform a dynamic warm up before practice for the next three weeks. The dynamic warm up will consist of jogging down and back on a basketball court and then performing sport specific stretching and movements (i.e quad stretch, side lunges, high knees, etc.). At the end of the three weeks, another testing session will take place that will be exactly like the first testing session.

At the next practice after the second test session, your daughter will complete a 10-15 minute movement prep routine. Your daughter will perform the movement prep routine before practice for the next three weeks. The movement prep routine will consist of activation exercises (movements performed with a resistance band), dynamic stretches (i.e lunges, knee hug, etc.), movement integration (marching and skipping movement patterns), and neural activation (quick feet drills). At the end of the three weeks, another testing session will take place that will be exactly like the first testing session.

**Risks and Benefits of Participating in the Study**

All jumping and cutting tasks carry inherent risks of injury such as musculoskeletal sprains and strains. However, the risks associated with the jumping and cutting tasks are no greater than playing in a basketball game. All prospective participants will have been cleared to participate in high school athletics by turning in a signed physical form. For the drop box vertical jump and T-shuttle agility test, the participants will get one practice trial to allow for familiarization with each test. If an injury were to occur during testing, basic first aid will be provided and SJU Life Safety will be contacted.

The benefit to your daughter will be that she will be performing a warm up that prepares her body for exercise, reduces her risk of injury, and has the potential to induce increases in her athletic performance. The group results will also be shared with the team after the data has been analyzed. Therefore, the coach will know which warm up gives the team the best chance for improvement.

The benefits to society will be a better understanding about which type of warm up best prepares the body for exercise, reduces the risk of injury, and contributes to increases in athletic performance.

**Confidentiality**

The data associated with this study will be kept confidential, since all data will be associated with the last four digits of your daughter’s ID number. In publishing this study, we will not include any information that will make it possible to identify individual participants. All data will be kept either on a password protected computer or stored in a secure cabinet. Only the researchers will have access to the records. All videotape files will be deleted after two researchers have each graded the jump landing. All grading will be finished within two weeks after each session.

**Voluntary Nature of the Study**

Your daughter’s participation in this research study is completely voluntary. Your daughter’s participation or non-participation will not affect your daughter’s current or future relations with Name of School, the College of St. Benedict/ Name of basketball team. Your daughter may discontinue her participation in this research study at any time without penalty or costs of any nature, character, or kind. If your daughter chooses to discontinue participation, your daughter’s data will be deleted immediately.

**Contacts and Questions**

You may ask questions at any time during your daughter’s participation. If you have questions prior to or upon your daughter’s completion of this study, please contact [Name of researcher] at [email@csbsju.edu](mailto:email@csbsju.edu) or (555) 555-5555. Dr. Name is supervising this research study and can answer any questions or concerns as well. She can be contacted at [email@csbsju.edu](mailto:email@csbsju.edu) or (320) 555-5555. Her office is located in the [Office Location]. You may also contact the current chair of the Committee on Research with Human Participants by email at [irb@csbsju.edu](mailto:irb@csbsju.edu).

**You will be given a copy of this form to keep for your records.**

**STATEMENT OF CONSENT**

I consent to my daughter volunteering to participate in this study.

* My daughter has received medical clearance to participate in high school athletics.
* My daughter has no current injuries or conditions that limit her physical activity.
* I know my daughter can stop participating in this study at any time without penalty or costs of any kind.
* I know the results may be published, but the data will be presented in a way that does not allow individual participants to be identified.
* I have had the chance to ask questions and I have received answers.

**I have read this form and I understand it. I agree that my daughter may participate in this project.**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# COLLEGE OF ST. BENEDICT/ST. JOHN’S UNIVERSITY

**Effects of high carbohydrate versus high fat drinks on metabolic profile during moderate intensity exercise in college-age females.**

**INTRODUCTION**

You are invited to be in a research study about the effects of high carbohydrate versus high fat drinks on fat or carbohydrate use during moderate intensity exercise in college-age females. This study is being conducted by: [Names of researchers]. You were selected as a possible participant because you are a female who does not participate in varsity or club sports and are recreationally active (exercise 4-5 days per week). We ask that you read this form and ask any questions you may have before agreeing to be in the study.

**BACKGROUND and PROCEDURES**

The purpose of this study is to determine if high fat or high carbohydrate drinks prior to exercise have an effect on what type of fuel you burn during exercise. If you agree to be in this study, we would ask you to do the following things: Be available for 2 roughly hour-long sessions 2-7 days apart. Record your food intake 24 hours prior to a pre-determined testing time. You will also be asked to fast (no eating or drinking anything but water) 3 hours prior to arrival at the testing site. Blood glucose and lactate will be taken using a finger prick and height/weight will be recorded. You will be asked to consume a high fat or high carb drink, coffee with coconut oil and butter or apple juice, respectively, prior to exercise testing. Exercise testing will consist of biking for 30 minutes at 70% of your maximum heart rate, which we will calculate for you. During exercise you will be connected to a breathing mask and heart rate monitor. The heart rate monitor will be worn around your rib cage. The breathing mask goes over your mouth and nose and fits snuggly. It does not restrict your breathing significantly and it allows us to measure your oxygen intake and carbon dioxide exhalation.

**RISKS/BENEFITS**

This study has four risks. First, exercise carries an inherent risk. To minimize this risk participants will complete a dynamic warm-up and we will only select participants who are recreationally active. Second, blood draws by finger prick could cause discomfort and dizziness. In order to minimize this risk trained individuals will collect blood samples and all health and safety regulations will be followed. Third, the face-mask necessary for data collection can cause some mild discomfort, however, a number of different mask sizes are available for optimal comfort. Finally, allergenic foods including butter, coconut oil, coffee, and apple juice will be used. All participants will be asked about known allergens prior to the study to minimize this risk. In the event of injury, trained personnel will be present and security will be contacted immediately. The session will be terminated if an acute injury occurs or at the participants request. This study will benefit participants by allowing them to learn about their metabolism during exercise.

**CONFIDENTIALITY**

Participants will be identified only by the last 4 digits of their school-issued banner ID number. Only student researchers and the faculty advisor will have access to the raw data stored on password-protected personal and institution computers. The records of this study will be kept private. In any reports or public presentations, no information will be included that would make it possible to identify a participant.

**VOLUNTARY NATURE OF THE STUDY**

Your participation in this research study is completely voluntary. You may stop participating at any time without penalty or costs of any kind. Your decision whether or not to participate will not affect your current or future relations with the College of Saint Benedict or Saint John’s University nor will it affect your personal or professional relationships with the researchers.

**CONTACTS AND QUESTIONS**

The researchers conducting this study are [Names of researchers]. You may ask any questions you have now. If you have questions later, you may contact them at [list all emails]. If you have additional questions you may also contact the CSB/SJU Institutional Review board chair at [irb@csbsju.edu](mailto:irb@csbsju.edu).

You will be given a copy of this form to keep for your records.

**STATEMENT OF CONSENT**

I have read the above information. I have asked questions and have received answers. I consent to participate in the research.

I attest that:

* I am at least 18 years of age.
* I have no known medical condition or physical injury that will prevent me from participating in exercise.
* I do not participate in a varsity or club sport at the College of Saint Benedict.
* I do not have any allergies that would inhibit me from consuming the indicated meals.

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# College of Saint Benedict/Saint John’s University

Informed Consent

**Measuring changes in VO2 Max, lactate threshold, running economy, and vertical jump over a cross-country season**

As a member of the College of Saint Benedict cross-country team, you are invited to participate in a research study examining the effect of a season of cross-country training on measures of aerobic and anaerobic fitness, including VO2 Max, lactate threshold, running economy, and vertical jump. Please carefully read and understand this form before deciding to participate in this study. You may ask questions at any time.

This study is being conducted by:

**Name**: College of Saint Benedict student

**Name**: Associate Professor of Exercise Science and Sports Studies

**Background Information**

Distance running, such as cross-country, is of interest to physiologists because it tests the limits of human performance. Endurance training changes how the body responds to exercise and it is important to understand how training changes maximal physical ability.

**Procedures**

1. If you choose to participate in the study, you will be asked to schedule two times to come to the exercise science lab: one at the beginning of the season, and one after the end.
2. First, height and weight measurements will be taken.
3. A 3-site skinfold test will be administered. Measurements will be taken at the triceps (back of the arm), suprailiac (just above the hip bone), and thigh (front of the leg above the knee). Three measurements will be taken at each site by slightly pinching your skin. You will be given the option to complete the skinfold testing in the exercise science lab, or in a private location such as the women’s locker room.
4. A vertical jump test will be completed next. You will be asked to stand on a mat that measures jump height. You will squat slightly and jump with maximal power upward. During the first jump, you will be coached on proper jumping technique to achieve the highest jump. This will be completed three times, the best of three measurements will be recorded.
5. A maximal treadmill test will be performed next to determine your maximal oxygen consumption (VO2 Max). During the treadmill test you will be connected to a machine, called the Parvo TrueOne Metabolic Cart, which will measure oxygen consumption while running. You will be connected with a facemask and a tube. As a safety precaution, you will wear a harness around your upper body, although movement or breathing is not restricted. In prep for the VO2 Max test, you will put on a heart rate monitor which is worn against the skin around the chest. The researcher will demonstrate how to wear the monitor and assist you in putting on the monitor if requested.
6. A baseline blood lactate reading will be taken, this consists of a finger prick blood sample. The primary researcher will wear a lab coat, goggles, and gloves. The skin at the finger prick site will be cleaned with an alcohol wipe. The finger will be pricked using a lancet. The finger prick will only cause minimal discomfort. The first drop of blood will be wiped away with gauze to prevent infection or contamination of the sample. The next drop of blood will be collected and tested in a blood lactate meter. All materials used in blood collection will be disposed of properly.
7. You will choose a speed you feel comfortable running at, (around 6.5-8 mph), and complete a 3-minute warm-up working up to that speed.
8. You will run at the chosen speed in 3 minute intervals, every 3 minutes the grade of the treadmill will be increased by 2%.
9. At the end of each 3-minute interval, your finger will be pricked to test blood lactate levels. At this time, your heart rate and rate of perceived exertion will be recorded as well using the Borg CR-10 Scale.
10. You will continue until you decide you cannot run any longer.
11. After a rest period of 10-15 minutes, you will be asked to get back on the treadmill to complete a running economy test. You will be hooked up the same machines and harness as previously.
12. You will complete 2, 5-minute running intervals. The first interval will be at an easy, ‘long-run’ pace, the second interval will be at your estimated 6-Kilometer race pace. Both of these paces will be self-selected and the same for the pre and post season testing.
13. For the second session at the end of the cross-country season, this exact procedure will be repeated again.
14. Each testing session should take approximately one hour for a total time commitment of 2 hours.

I ask that if you choose to participate in the study, please come to the lab wearing running shoes and comfortable attire for both sessions. Refrain from consuming large amount of caffeine or alcohol 24 hours prior. Also refrain from intense exercise 24 hours prior (testing sessions will be scheduled to avoid hard-workout days). Finally, on the day of the testing session, refrain from eating a large meal within 2 hours prior to the start of the testing session.

**Risks and Benefits of Participating**

There are three risks to participation in this study. First, this study may involve musculoskeletal injury from running and jumping; however, the risk is no greater than the exercise completed as a member of the cross-country team. Second, while completing the maximal treadmill test, there is a risk of falling on the treadmill, although a safety harness will be worn as a precaution. Neither breathing nor movement will be restricted during the maximal treadmill test due to the harness or the breathing mask and tube. Third, due to blood being drawn for lactate testing, there is a risk of infection. In order to minimize this risk, gloves, antiseptic wipes, gauze pads, lab coats, and goggles will be used when the blood is drawn. Anyone involved in the blood draw will have completed the blood born pathogen online training course. If injury does occur during the testing session, appropriate measures are in place, and CSB security will be called. An ESSS lab assistant or faculty advisor will be present at all testing sessions. The faculty and lab assistants are also familiar with the emergency response protocol of the ESSS lab. Participation in this study can benefit the athlete by understanding the purpose of their training. Participants will learn their VO2 Max, lactate threshold, running economy, and vertical jump values.

**Confidentiality**

All data collected in this study will remain confidential and will be linked only to the last 4 digits of your Banner ID number, not to your name. All data collected on paper will be immediately transferred to an Excel file, and all paper copies will be shredded following the session. Additionally, after the data is collected and analyzed, ID numbers will be removed from the data to ensure values cannot be linked back to you. The only people who will have access to the raw data are the primary researcher (Name), and the course instructor (Name). In the final report, there will be no information included that could lead to your identification.

**Voluntary Nature of the Study**

Your participation in this study is completely voluntary. During the study, it is your right to terminate participation at any time. There is no penalty or cost of any nature if you choose to discontinue your participation in the study. Your participation or non-participation will not affect your relations with the College of St. Benedict, St. John’s University, or the College of St. Benedict Cross-Country team.

**Contacts and Questions**

The primary researcher conducting this study is Rachel Nelson. The course instructor for this study is Name. You are free to ask any questions prior to, during, or after the completion of the study. The primary researcher can be contacted at: email@csbsju.edu. The course instructor may be contacted at [email@csbsju.edu](mailto:email@csbsju.edu). You may also contact the Institutional Review Board (IRB) chairperson at [irb@csbsju.edu](mailto:irb@csbsju.edu)

**If you desire, you will be given a copy of this informed consent form to keep for your own records.**

**Statement of Consent**

* I have volunteered myself to participate in this study.
* I am at least 18 years of age.
* I have no current injuries or medical conditions that may limit my physical activity.
* I am medically cleared to participate in collegiate sports.
* I am aware that I can terminate my participation in this study at any time without penalty.
* I know that the results of this study may be published, but that my confidentiality will be maintained.
* I have had the opportunity to ask questions and receive answers for said questions.

**I have read this form in its entirety. I understand what I have read. I agree to participate in this study.**

**Signature Date**

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**Printed Name**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# College of Saint Benedict | Saint John’s University

Informed Consent

**Title of Project**

**Introduction**

As a pre-healthcare student at the College of Saint Benedict and Saint John’s University, you are invited to participate in a research study about (what the research being conducted is about). You must be at least 18 years of age and be enrolled in either *ESSS 273-Health and Fitness* and/or *BIOL 325-Human Anatomy/Physiology I* to participate. You must not currently engage in regular mindfulness meditation practice to be eligible to participate in this study. Please read the entire form and ask any questions you may have before agreeing to participate in the study.

The study is being conducted by:

**Student Conducting Research**: School of the student

**Professors assisting in Research**: Faculty Position

**Background**

College students are often very stressed, and stress can lead to some bad health outcomes for students. Mindfulness meditation improves health and reduces stress. Mindfulness simply means being aware of the present moment. The goal of this study is to see if mindfulness meditation will reduce stress in college students over 8 weeks.

**Procedures**

1. The total time commitment of the study is approximately 638 minutes over 8 weeks, but only about 10 minutes per day.
2. Procedures are listed in easy to read detail with time commitments indicated.
3. Document text should be at an 8th grade reading level.

**Risks and Benefits**

**Risks:** Each potential risk is identified. Numbered or bulleted lists are often recommended because they are easier to read than long paragraphs.

**Benefits:** List all potential benefits.

**Confidentiality**

Mindfulness meditation and stress data collected during the study will only be seen by the researchers. The survey responses and the emWave data will be linked to the last 4 digits of your student Banner ID. A key will be made connecting your name to the last 4 digits of your Banner ID number, but the key will be stored on a password protected document accessible only by the faculty advisor. After the research is complete, all ID numbers will be deleted from the data and the key will be destroyed. All course grade and GPA data will only be accessible by {faculty advisor} once the grades are retrieved from your instructor. In the event the primary researcher would like to publish the report, no information will be linked to you directly.

**Voluntary Participation**

Participation in the study is completely voluntary. Your decision whether or not to participate in the study will not affect your relationship with your current professor or the College of Saint Benedict and Saint John’s University. You may terminate your participation in the study at any time if you so choose, without any penalty. If you do choose to stop participating, your data will be deleted.

**Contacts and Questions**

[Names] are the researchers conducting the study. If you have any questions, you may ask them now. If you have a question at a later time, you may contact [researcher names and email]. Additional questions may also be directed to [faculty advisor name], the faculty advisor for the research [faculty advisor email] or the current chair of the Committee on Research with Human Participants [[irb@csbsju.edu](mailto:irb@csbsju.edu)]. A copy of the informed consent will be available if you would like one.

**Statement of Consent**

* I am at least 18 years of age.
* I currently enrolled in ESSS 273-Health and Fitness and/or BIOL 325-Human Anatomy/Physiology I.
* I currently do not engage in daily, guided meditation practice.
* I consent to participating in the mindfulness and stress research, not including the use of my course grades or GPA.

**I have read the above information. I have asked questions and received answers. I consent to participate in the mindfulness and stress research.**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

If you would like to participate further in this study by allowing Dr. Stenson access to your course grades and GPA, please complete the following. You do not have to consent to this section if you do not want your grades used for analysis. You may participate in the daily mindfulness meditation and stress study without the use of your grades for analysis.

**Statement of Consent**

* I consent to my professor (Names of Profs) giving my course exam grades and overall course grade to Name of Prof.
* I consent to Dr. Stenson using my GPA data from CSB/SJU Banner for this study.
* I understand that no one will have access to my course grades or GPA other than Name of Prof.
* I understand that once the data is compiled, my name and the last 4 digits of my Banner ID number will be removed from the data so that my data cannot be linked to me

**I have read the above information. I have asked questions and received answered. I consent to participate in the mindfulness and stress research with use of my grades and GPA.**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Oral Consent Script for Research With International/Vulernable Populations/Consent to Take Photographs**

[oral script to be read aloud, should be translated into local language as needed, can be used as model for international research or research with vulnerable populations]

The purpose of this study is to examine [state what the research is about]. The results of this study will be used to help me to better understand these challenges.

Your participation in this study will involve one interview that lasts approximately 1 hour. Interview questions will be about [topic of interview]. After this interview, if you are interested in participating further, you may have up to 2 follow-up interviews, before the end of [date]. I will ask you after this interview if you are interested in meeting with me again. Even if you agree to meet with me in the future, you can change your mind at any time. There is no compensation for your participation in this research.

This study poses minimal risk to you. Minimalrisk means that you are not likely to be hurt or upset during this interview.

If you are uncomfortable during the interview, you may choose not to answer a question or you may stop talking to me at any time. You can skip any question for any reason at any time.

Although this interview may not help you directly, other people may be helped by what I learn in the future.

You will not be identified in any reports on this study. Your information will not be shared with anyone. Any information that includes your name will be kept on a locked computer and locked in a room at all times. I will keep this information for as long as I am doing research in this area. I will use this information for future research. But, as long as I need to keep this information, I will make sure that it is safely stored so that no private information about you is available to other people.

If you have any questions or concerns at any time, please contact me by sending a message or coming to [location of study, where appropriate].

You do not have to participate in this interview. Even after you agree to participate, you can stop talking to me at any time without any consequences. You may refuse to answer any question you do not want to answer.

If you have any questions, please feel free to contact me at any time: [local contact information of researcher]

If you have any concerns that you want to speak with someone else about, please contact [name and contact info of another local person they can contact] or email the IRB Chair at irb@csbsju.edu

**Oral assent of the subject: Interview participation**

Name of subject: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Read this statement to the subject:

*You have read or been told about this interview. [your name] has offered to answer any questions you may have concerning the study. Do you agree to participate in the study?*

Yes \_\_\_\_

No \_\_\_\_

**Oral assent of the subject: Audio recording**

This interview will be audio recorded. Upon completion of the study, this tape will be saved for future research. However, your name will not appear on the tape, and in no way will it be identified with you.

*Do you agree to have this interview audio recorded? You may still participate in this study if you are not willing to have the interview recorded.*

Yes \_\_\_\_\_

No \_\_\_\_\_

**(Optional section: only to be asked when a photograph is desired. Oral consent will be requested from all adults present.)**

I would like to take a photograph of you. This photograph will be saved for future research to be used in publications or presentations. This photo will never be linked to your name.

*Do you agree to have me take a photograph of you?*

Yes \_\_\_\_

No \_\_\_\_

**FOCUS GROUP SECONDARY CONSENT FORM**

[study title]

[**DELETE THIS NOTE:** This consent form is used in addition to the one for general participation in the study. If your study only involves a focus group and no other form of data collection, you should add the other parts of a standard consent form (about the research overview, confidentiality etc) to this one. If you are using multiple forms of data collection, such as surveys or individual interviews, you can go over this at the start of the focus group so everyone is clear on this information.]

**PURPOSE**

To cover the ground rules of participating in a focus group and to ensure confidentiality.

**STATEMENTS OF CONFIDENTIALITY**

The records of this study will be kept private. Physical research records will be kept in a locked file cabinet, and electronic records will be kept on a password secured computer; only the researchers will have access to the records. In any reports or public presentations, no information will be included that would make it possible to identify a participant.

Focus groups can be a fruitful way to have conversations with peers about important topics, but it also means you have to rely on each other to maintain confidentiality. In order to participate in this focus group, you must agree to not disclose any information about the conversations or people involved in this focus group. Anything discussed here must not be discussed outside of this focus group.

**OTHER REMINDERS**

We ask that you please do not disclose any illegal activity.

This is not a counseling session or support group.

Everyone’s ideas will be respected. To ensure this, we ask that only one person talks at a time.

Being here is voluntary. You do not have to talk about anything you don’t want to, and you can stop participating or leave at any time.

You should do your best to not use anyone’s names, including the names of those not present in this focus group. If you forget or slip up, however, the names will not be transcribed.

This focus group will be audio/video recorded.

We will now provide you with a handout with information about services you may wish to access.

**CONTACTS AND QUESTIONS**

The researchers conducting this study are [names of researchers]. You may ask any questions you have now. If you have questions later, you may contact them at [contact info]. If you have additional questions you may also contact the CSB/SJU Institutional Review board chair at [irb@csbsju.edu](mailto:irb@csbsju.edu).

If you need any mental health resources as a result of your participation, students can obtain counseling services from CSBSJU on Monday through Friday from 8am-4pm by contacting CSB Counseling at (320) 363-5605 or SJU Counseling at (320) 363-5605. There are also after-hours crisis lines available at 320-253-5555 or 1-800-635-8008.

 You will be given a copy of this form to keep for your records.

**STATEMENT OF CONSENT**

I have read the above information. I have asked questions and have received answers. I consent to participate in the research.

I attest that I am at least 18 years of age.

I consent to participate in the survey.

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**