

RESEARCH PARTICIPANT INFORMATION AND CONSENT FORM

AphasiaBank

PURPOSE

We want to collect data for the study of language and communication in people with aphasia.



TASKS

You will be asked to:

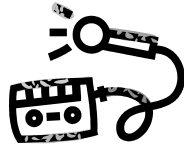
- Describe pictures
- Discuss events in your life
- Tell a story
- Complete aphasia tests



RECORDING

You will be:

- Audio taped



- Videotaped



Your responses will be written out.

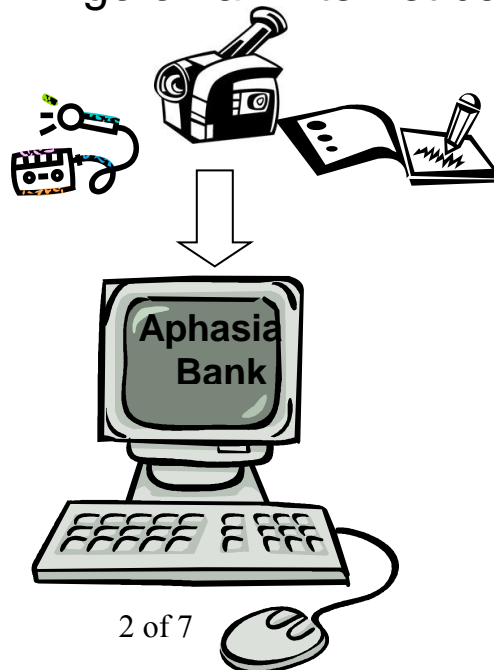


Your name and address will not be recorded.

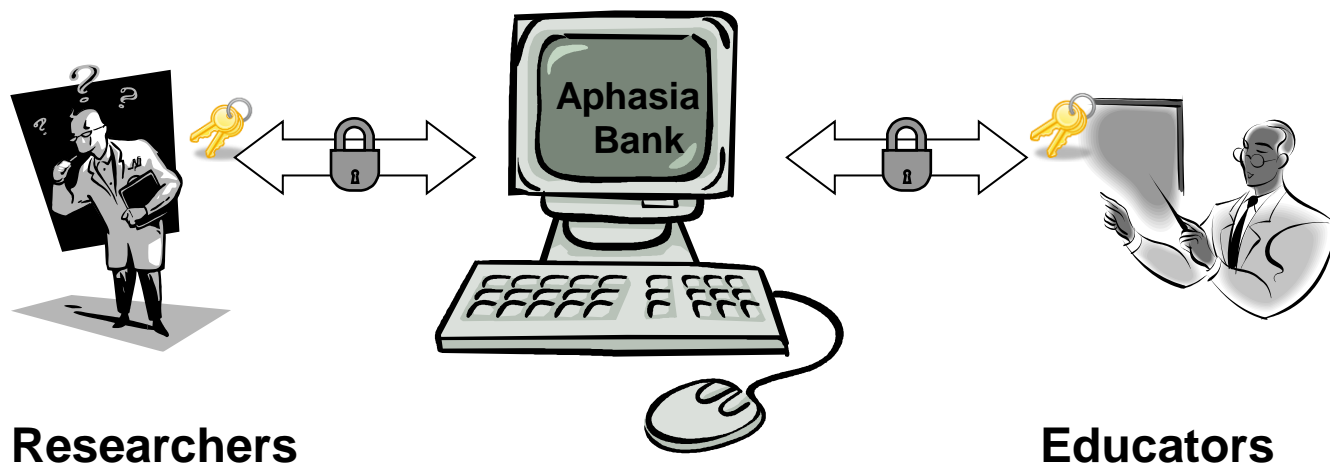


USE

The data from the study will go on an internet database called AphasiaBank.



Researchers and educators with a password will have access the data.



Researchers or educators may use the videos in classes or presentations about aphasia.



RISKS

There are NO **known** risks or discomforts associated with this study.



COMPENSATION

There is no monetary compensation for participating.



BENEFITS

You will help us improve our understanding of aphasia.

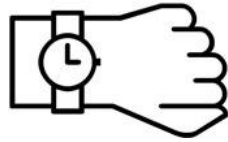


We can give you your test results for your files.

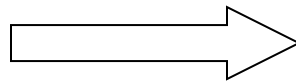


TIME

It will take 2 to 3 hours.

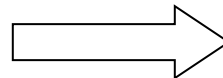


If you get tired, we can stop and finish another day.



RIGHTS

Your participation is voluntary.



Yes?

No?

You can stop at any time.





Questions about the study:

Contact

Enter Name & Phone

or

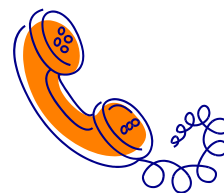
Enter Email address



Questions about your rights:

Contact

at




CONSENT TO PARTICIPATE

The information on the previous pages has been explained to me



YES 

NO 

I have been given a copy of this form.




YES 

NO 

I agree to participate in the research project.



YES 

NO 

PARTICIPANT SIGNATURE

DATE

WITNESS SIGNATURE

DATE