

**SIGNATURE PAGE OF CONSENT FORM**  
**FOR RESEARCH INVOLVING CHILDREN AGES 7-17**  
Parental Permission Form for  
Research on

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Title of Project

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I have read or had explained to me a description of the research project, and I understand the procedure described on the attached pages. I also have received a copy of the description.

I give permission for my child \_\_\_\_\_ to participate in the study.  
Child's Complete Name

Child's Date of Birth \_\_\_\_\_  
Month/Date/Year

\_\_\_\_\_  
Signature of Parent and/or Legal Guardian

\_\_\_\_\_  
Date