Debriefing Document

***DIRECTIONS FOR USE OF THIS TEMPLATE:***

* *Replace bracketed items in the header, such as “[Title of Study]” with the requested information.*
* *Read the guidelines for each section, complete each section as applicable for your project, and then delete the template guidelines.*
* *Example text may be used if needed but should not be left italicized. Instructions in red font should be replaced or deleted.*
* *For studies involving* ***deception*** *or studies designed in such a way that providing complete background information will invalidate the study, participant’s responses must be able to be linked back to them so the option to withdraw their data after the deception is disclosed is preserved.*

Dear Research Participant:   
  
During this study, you were asked to <<include a brief description of the study task(s)/procedure(s) the participant was asked to perform>>. You were told that the purpose of the study was <<state the purpose as it was presented in the consent document>>.

The actual purpose of the study was <<state the actual purpose of the study>>. We are conducting this study because <<provide a rationale for the research>>. We did not tell you the real purpose of the study because <<state the reason(s) for not providing this information up front>>.

We would like to remind you that your participation in this research is completely voluntary. It is up to you to decide whether or not to continue participating in this study. If you decide to withdraw from the research at this time, we will destroy any data collected about you during this study. The decision to withdraw from this research will involve no penalty or loss of any benefits to which you are otherwise entitled. This will not affect your relationship with the investigator. If you would like to withdraw from this study, please let the investigator know.

* I give permission for my data to be used in this research project.
* You may not use the data collected from me. Please destroy all data collected from me.

If you have any questions, concerns, or complaints or if you feel you have been harmed by this research, please contact *<<list contact person, their affiliation (e.g., Department of Psychology, University of Utah) and a phone number>>*.

Contact the Institutional Review Board (IRB) if you have questions regarding your rights as a research participant. Also, contact the IRB if you have questions, complaints or concerns which you do not feel you can discuss with the investigator. The University of Utah IRB may be reached by phone at (801) 581-3655 or by e-mail at [irb@hsc.utah.edu](mailto:irb@hsc.utah.edu).

You may also contact the Research Participant Advocate (RPA) by phone at (801) 581-3803 or by email at [participant.advocate@hsc.utah.edu](mailto:participant.advocate@hsc.utah.edu).

Again, please accept our appreciation for your participation in this study.