

UNIVERSITY OF MICHIGAN

CONSENT TO BE SCREENED FOR ELIGIBILITY IN A RESEARCH STUDY

NAME OF STUDY AND RESEARCHERS

Title of Project: Project Amaze

Principal Investigator: Maureen Walton, PHD

GENERAL INFORMATION

You are invited to take a short survey to see if you qualify for a research study. The study will help us learn about ways to deliver wellness information in a way that is helpful to 16-24 year olds who use Facebook.

Before you can join the study, we will need to make sure you qualify. **You must be between 16 and 24 years old.** You will need to take a short survey that asks questions about where you live, your social media use and health behaviors, including alcohol use. These questions will take about 5 minutes to answer.

If you qualify to be in the study, we will ask for contact information so that we can send you a message with a link to more information about the study and another consent form. That form will explain the details of the rest of the study.

Taking this survey is voluntary. If you don't want to take this survey, it won't affect your Facebook access or account in any way.

There is no direct benefit to you for completing the survey. If you choose to take the survey, your answers will remain confidential and protected. Your answers to the survey will not be connected back to you unless you qualify for the study and give us your name.

CONTACT INFORMATION

To find out more about the study, to ask a question or express a concern about the study, or to talk about any problems you may have as a study subject, you may contact one of the following:

Principal Investigator: Maureen Walton, PhD
Mailing Address: University of Michigan
2800 Plymouth Rd, NCRC – Bldg 16
Ann Arbor, MI 48109-2800
Telephone: 734-615-4225
Email: Amaze-Crew@med.umich.edu

Study Coordinator: Diane Schneeberger, MSW
Mailing Address: University of Michigan
2800 Plymouth Rd, NCRC – Bldg 16
Ann Arbor, MI 48109-2800
Telephone: 734-615-4479
Email: Amaze-Crew@med.umich.edu

Website: www.ProjectAmaze.org

You may also express a concern about a study by contacting the Institutional Review Board:

University of Michigan Medical School Institutional Review Board (IRBMED)
2800 Plymouth Road
Building 520, Room 3214
Ann Arbor, MI 48109-2800
734-763-4768
E-mail: irbmed@umich.edu

If you are concerned about a possible violation of your privacy or concerned about a study, you may contact the University of Michigan Health System Compliance Help Line at 1-866-990-0111.

CONSENT

[Please click here to save or print a copy of this consent form.](#)

If you agree to participate in this study, please click “yes” to the question below to complete the survey.

Do you agree to take this survey to see if you qualify for the study?

☐ **YES**

☐ **NO**



submit button