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UNIVERSITY OF CALIFORNIA, SAN DIEGO
CONSENT TO ACT AS A RESEARCH SUBJECT

Victor Ferreira, Ph.D., is conducting a research study, sponsored by the National Institutes of Health, to find out more about how language-processing mechanisms work. You have been asked to take part because you are a member of the UCSD general community. There will be approximately 75 participants in the study. If you agree to be in this study, you will produce language (i.e., talk) and respond to stimuli (i.e., press buttons) when shown written or spoken statements or pictures. One study session will include between 1-5 language production tasks, the total duration of which lasting no more than one hour. If you agree, your audible responses may be recorded (see separate consent form for audio recording).

Participation in this study may involve some added risks or discomfort. These include potential for boredom and fatigue. Other risks are no greater than those experienced in everyday life.

In consideration for your time and travel, you will receive $10 for every hour or part hour that you participate in this research. You will receive payment in cash, and will be asked to sign a receipt acknowledging payment.

There may or may not be any direct benefit to you from these procedures. The investigator, however, may learn more about how language processing works, and thereby be able to contribute to development of medical, therapeutic, and technological issues related to language use.

_____ has explained this study to you and answered your questions. If you have other questions or research-related problems, you may reach Victor Ferreira, Ph.D., at 858-534-6303 or vferreira@ucsd.edu. You may call the Human Research Protections Program Office at (858) 246-4777 to inquire about your rights as a research subject or to report research-related problems.

Participation in research is entirely voluntary. You may refuse to participate or withdraw or refuse to answer specific questions in an interview or on a questionnaire at any time without penalty or loss of benefits to which you are entitled. If you decide that you no longer wish to continue in this study, you will be required to inform study personnel, at which point you will be canceled from the study session without penalty.

The PI may remove you from the study without your consent if the PI feels it is in your best interest or the best interest of the study. You may also be withdrawn from the study if you do not follow the instructions given you by the study personnel.

Research records will be kept confidential to the extent allowed by law. As with all research, there is also the possibility of loss of confidentiality. Information from study participants will be identified by a study number. The database which relates the study number to a specific subject will be maintained in the study coordinator's office.

You have received a copy of this consent document to keep. You agree to participate.

_____	_____	_____	_____
Subject's Signature	Print Name	Witness	Date