

ATTACHMENT G2:

ADOLESCENT ASSENT INSTRUMENT

FLASHE

Family Life, Activity, Sun,
Health, and Eating Study

[FAQs](#) | [Contact Us](#)

OMB # 0925-XXXX
Exp. Date: xx/xx/20xx

Collection of this information is authorized by The Public Health Service Act, Section 411 (42 USC 285a). Rights of study participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. The information collected in this study will be kept private to the extent provided by law. Names and other identifiers will not appear in any report of the study. Information provided will be combined for all study participants and reported as summaries. You are being contacted by the National Cancer Institute (contact: FLASHEStudy@Westat.com) so we can learn about behaviors that might prevent cancer.

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-XXXX). Do not return the completed form to this address.

Before we can officially sign you up for the Family Life, Activity, Sun, Health, and Eating (FLASHE) study, we want to make sure you agree to participate. Your [RELATIONSHIP], [PARENT NAME] has already given permission for you to participate but that does not mean that you have to participate in the study if you do not want to. Please read the statements below, mark the appropriate selections, and click "Next" at the bottom of the screen.

There are some things you should know about FLASHE:

- Your participation is voluntary. You don't have to do any of the study activities if you don't want to.
- You may stop your participation in the study at any time. Even if you have already started the study, you can stop if you want to.

The purpose of the FLASHE activities is to conduct research on daily lifestyle practices that may affect health. The first part of this study involves doing two online surveys. You are one of 2,500 teenagers that will be participating in the surveys. One survey will be about your physical activity and the other will be about your eating habits. You will receive \$5 for each survey you complete. Your [RELATIONSHIP], is participating in the FLASHE study and will also be completing two surveys. There are no health benefits to you for participation in FLASHE.

To protect your privacy:

- Your responses will not be shared with anyone, including your [relationship], and will be kept private to the extent allowed under the law.
- A secure server is used for all surveys completed online so your responses cannot be seen or accessed by anyone who should not have access.
- All responses will be given a code that will not be linked to your name or other personal information.
- Your answers will be grouped with those of other people who complete the surveys.
- Reports from the study will not include your name or other information that could identify you.

Before consenting, if you have any questions about any part of this study or your rights as a participant click the "Contact Us" link above (you will be able to begin again after obtaining feedback from the study). Else, please indicate your agreement to participate in the surveys:

- I agree to participate in the study surveys.
- I do not agree to participate in the study surveys.

Your **may** also be asked to participate in an additional part of the study that will measure physical activity levels. A total of 900 teenagers will be participating in this part of the study. If selected, you will be asked to wear a wrist accelerometer (a monitor that records body movement) for seven days in a row and to fill in a log recording when you wore the accelerometer. After the seven-day "wear" period, you will be asked to return the accelerometer and log in a pre-paid envelope that will be provided. You will be given [\$20/\$40] for participation in the motion sensing study. Although wearing the monitor may be a little uncomfortable for some people, it does not hurt. [Click here for additional information about the motion sensing device.](#)

Please indicate your agreement to participate in the Motion Study portion of FLASHE:

- I agree to participate in the motion study.
- I do not agree to participate in the motion study.

If you turn 18 during the course of the FLASHE study, this form will be considered equivalent to an adult consent form. Please click the "Next" button below to officially record your agreement.

[NEXT](#)

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