

National Institute of Nursing Research (NINR) New Brochure Feedback Survey

OMB CONTROL NO.: 0925-0648 EXPIRATION DATE: 3/2018

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This survey seeks your feedback on a <u>draft version</u> of a new informational brochure. Your responses to the survey will help the National Institute of Nursing Research (NINR) develop a final version of the brochure.

CONSENT FOR PARTICIPATION

Before you take the questionnaire today, we need to ask you to formally consent to participate. Please carefully read the following statements and check the box below acknowledging that you understand each statement and agree to participate in the survey.

- a. I understand that my participation is voluntary. I can choose not to answer questions, and I can withdraw from the questionnaire at any point.
- b. I understand that all information collected in the questionnaire is secure to the extent permitted by law, and will not be disclosed to anyone but the researchers conducting this study, except as otherwise required by law. All findings will be reported in aggregate.
- c. I will not be asked any personally identifying information when responding to the questionnaire. My personal identity will be protected. A transcript of the questionnaire will be stored securely and will only be accessible to the research team. No one will be identified in reports resulting from this questionnaire.

NINR is authorized to conduct the following survey under section 42USC 285q of U.S. Law.

If you have questions about the survey or your participation, please contact the National Institute of Nursing Research by email at info@ninr.nih.gov or by phone at 301-496-0209.

By selecting "I Accept," I acknowledge and accept the consent statement and agree to participate in the questionnaire.



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