**Research Sample Repository for Hematopoietic Cell Transplantation, Other Cellular Therapies and Marrow Toxic Injuries**

 **Minor Recipient Assent Form (12 to 17 years of age)**

**Secondary Primary Malignancy**

We ask for your permission to collect and store your blood and/or tissue samples for future research. Your blood and tissues have genetic information, called DNA. We want to study your blood, tissue and DNA to learn what makes blood or marrow transplants (BMT) and other cell therapies work.

We’re asking you to participate because you have been diagnosed with cancer after being treated with transplant or cell therapy.

Researchers may use your samples to learn more about:

* What affects transplant and cell therapy results
* Diseases treated by transplant and cell therapy
* How to match donors and patients for BMT

Your doctor, or one of the medical staff at your hospital, will talk to you about what it means to be in a research study. You can talk to your parents about giving blood for research. You can ask your parents or your doctor any questions you have.

If you agree to participate in this study, here’s what will happen:

* Depending upon your transplant or cellular therapy and the type of cancer diagnosed after treatment:
	+ Your doctor may collect a small sample of your blood (up to 3.3 tablespoons).
	+ Your doctor may have also collected a biopsy of the cancer tissue as part of your standard of care. This previously collected tissue may be requested.
* Your blood, tissue and DNA will be stored. Your name will **not** be on the containers.
* We will keep the samples at the **Research Sample Repository** for future research. A repository - like a warehouse - is a place that protects, stores and sends out samples for research studies. The research studies must be approved by a group of scientists. Your samples may be stored and used for months, years or decades.

You will have treatment for your disease, whether or not you agree to give the blood/tissue sample for research. You may be asked to give another blood sample in the future, but you don’t have to give any future blood samples if you don’t want to.

If the blood is drawn from your catheter, you will not feel any pain. If the blood is taken from a vein, you will probably feel some pain. You may have some bleeding or get a bruise.

Letting the CIBMTR use your blood/tissue sample will not help you. The tests the CIBMTR will do on your blood/tissue sample may help other people that are sick and need a transplant or cellular therapy.

You don't have to let the CIBMTR use your blood/tissue sample. Your doctors or your parents will not make you give the blood/tissue sample if you don't want to. Your doctors and nurses will not be mad at you if you don’t want the CIBMTR to use your blood/tissue sample. If you agree to allow your blood/tissue sample to be used for research but change your mind later, the CIBMTR will stop using your blood/tissue.

If you sign your name on this form, it means you agree to give a blood and tissue sample to be used for research. You will be given a copy of this form to take home and keep.

**Minor Assent**

If you agree to be in this study, sign here:

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#### Minor’s Signature Date

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*Print Name of Minor Age of Minor*