

The UM-SOM GPRA team requests your permission to contact an assigned parole or probation officer if you are unreachable for your Discharge and/or 6-Month Follow-up interviews. In order to maintain HIPAA compliance, UM-SOM will not disclose the nature of the research, or any other personal information to your parole officer. We will only tell them that you are participating in a research study and ask for your current contact information to get in touch with you for the study.

I \_\_\_\_\_ give UM-SOM permission to contact my probation officer, \_\_\_\_\_ at number \_\_\_\_\_ if they are unable to contact me to continue the research for the GPRA per my Participant Agreement dated \_\_\_\_\_. This consent will expire one year from the date below.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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