**Sample Consent Form for MAE Students**

This form is a sample, annotated form to help you in writing your own consent document. **DO NOT simply print this page.** Follow the footnotes to find what information is necessary in typical MAE project consent forms and how it is best conveyed. If you have any questions, please contact the IRB Administrator at kmckim@truman.edu

Dear Parent or Guardian,

I am a student at Truman State University and am completing the teacher preparation program as an intern in Mr. Doe’s class[[1]](#endnote-1) this semester.   In fulfilling requirements for Truman State University, I will work with Mr. Doe in implementing a program for improving students’ writing skills.[[2]](#endnote-2)  This program involves a daily writing exercise in which the teacher gives the class a writing “prompt” (statement or picture, e.g.) and the students have five minutes to write in response to the prompt.[[3]](#endnote-3)  I want to see if this exercise, repeated over 15 days, will lead to an increase in students’ writing fluency and use of descriptive words. There are no foreseen risks of participating in this study.[[4]](#endnote-4) There is no penalty for refusing participation or for withdrawing from the study.[[5]](#endnote-5)

To find out if the writing prompts are effective, Mr. Doe and I will compare children’s writing at the end of the 15 days (posttest) with their writing before the program began (pretest).  I will write up the results and present the information in a paper that I will submit to Truman State University.[[6]](#endnote-6)  Unless you request otherwise, your student's data collected during this activity will be included in my paper.[[7]](#endnote-7)  Since this is a classroom activity, all students will participate in the activity. Participation in my research study means that the data I collect about your student will be used in my paper. Please know that your child will not be identified as a participant in the study and that data will be reported without reference to any student.  This confidentiality is required by Truman State University.[[8]](#endnote-8)

If you have any questions about this project, please contact: Jane Doe via email at janedoe@truman.edu, by calling Mr. Doe's room at 555-555-5555, or via cell phone at 555-555-5555. University Supervisor Dr. Dale Doe can also be contacted via email at daledoe@truman.edu. You may also contact the Truman State University Institutional Review Board Administrator, at (660) 785-7245 or by email at irb@truman.edu if you have questions about your child's rights as a participant in this project.[[9]](#endnote-9)

I look forward to this project and appreciate your attention to this request.

Sincerely,

Jane Doe

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 Dear Parent or Guardian: If for any reason you **do not** wish your child’s data to be included in the paper I prepare, please sign below and return this letter to me by [*insert date here*].[[10]](#endnote-10)

To: Ms. Jane Doe,

I request that data for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ not be included in the paper you prepare for your degree program at Truman State University.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Clarify the class and teacher with whom you are working. [↑](#endnote-ref-1)
2. Explain the basic goal of your project. [↑](#endnote-ref-2)
3. Explain what the students will be doing. [↑](#endnote-ref-3)
4. Explain the potential risks and benefits of the study. [↑](#endnote-ref-4)
5. Explain that subjects can refuse/withdraw participation at any time without penalty. [↑](#endnote-ref-5)
6. Clarify how you will use the students' data. [↑](#endnote-ref-6)
7. This requests *passive consent*. This means that parents/guardians will sign the consent form if they DO NOT wish for their student's information to be included in the study. Therefore parents who do not submit a signed consent form *passively* give consent for the project. [↑](#endnote-ref-7)
8. This explains that the study is confidential (***not the same as*** ***anonymous***). Confidential studies have identifying links between your data and specific students, allowing you to reference specific data to specific individuals. Confidentiality ensures that that link will remain private and secure, and will be destroyed upon completion of the study. [↑](#endnote-ref-8)
9. You must include at minimum the contact information for the lead investigator and the investigator's faculty sponsor at Truman State University. This should include at least one e-mail address *and* one telephone number for each contact listed. Optionally, you can include contact information for the IRB administrator. [↑](#endnote-ref-9)
10. If students' parents or guardian have not returned a signed form by this time, you are then permitted to include their student's information in your study. [↑](#endnote-ref-10)