

## **PARENT CONSENT FORM**

### **EXAMPLE**

Thank you for your interest in participating in our research project. This form describes the project and what will be asked of you today. Please read over it carefully and let us know if you have any questions.

#### **What is the purpose of this research?**

We are interested in knowing how mother-child conversations relate to children's development.

#### **What will be asked of me today?**

First, we are going to ask you and your child to play a game together for 10 minutes. After this, we are going to ask you to have four conversations with your child. We will give you some specific instructions on what you should talk about. After this, we will have some questionnaires for you to fill out. These questionnaires will ask you about your child's behavior and your interactions with your child. While you are filling out the questionnaires, we will be engaging your child in a number of tasks that tap your child's cognitive, social, and emotional development. Our session today will be videotaped to allow us to analyze the results later. We expect our visit today to last about 90 minutes to 2 hours.

#### **Are there any risks to participating?**

We don't expect you to encounter any risks other than those experienced in everyday life. Our experience with tasks such as these is that parents find them interesting and children find them to be fun.

#### **Will my privacy be protected?**

Yes! Your privacy is very important to us. Your information will be kept in a locked office and only Dr. Researcher or her trained research assistants will have access to this information. We will give you and your child a unique ID number and we will use this number in our files, not your name. Your name will never be publically shared. We will never publically share the videos we take today. In any report we may publish, we won't report individual responses, only overall responses for the group. All videos will be destroyed five years after the study is complete.

#### **Is this research voluntary?**

Yes! Your participation today is completely voluntary. You can decide right now that you don't want to participate and that is okay. You can stop at anytime once we begin. You can skip any questions on the survey that you don't feel comfortable answering. If your child seems

uncomfortable with a task we will stop. If you sense your child feels uncomfortable with a task you can ask us to stop. Whether or not you participate will not affect you or your child's relationship with Texas Tech University.

**Will I receive any compensation for participating?**

To thank you for your time today, you will receive \$40. Your child will receive stickers throughout the session and will receive a small gift at the end of the session.

**Can I find out the results of this study?**

Once we complete the data collection and analysis for the study we will send you an update with our finds. Please note that this may take up to two to three years. We cannot provide you with individual results for your child. We want to emphasize that our tasks are not diagnostic, meaning they don't say whether your child has any problems. Children just respond differently to these tasks, and we are interested in understanding these differences.

**Who should I contact if I have more questions?**

The researcher conducting this study is Dr. Researcher. Dr. Researcher may be reached by email at [doctor.research@ttu.edu](mailto:doctor.research@ttu.edu) or by phone at XXX-XXX-XXXX. For additional questions about your child's rights as a subject, contact the Texas Tech University Human Research Protection Program, Office of the Vice President for Research, Texas Tech University, Lubbock, Texas 79409. Or, you can call (806) 742-2064.

Print Name: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_

Name of Child: \_\_\_\_\_

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

This consent form is not valid after **Month/Date/Year**.

(Remember, even if you do say, "Yes," now, you can change your mind later.)