You are being asked to allow your child to take part in a research study carried out by Craig Parks, Grant Norton, and David Bahr. Please read this form carefully, taking as much time as you need. Ask the researcher to explain anything you don’t understand. This study has been approved for human subjects to take part by the Washington State University Institutional Review Board.

You may refuse to give permission, or you may withdraw your permission for your child to be in the study, for any reason. Your child will also be asked if he or she would like to take part in this study. Even if you give your permission, your child can decide not to be in the study or to leave the study at any time.

What is this research study about?

This research study is being done to help us learn about high school student interest in science, technology, engineering, and mathematics (STEM). We are asking your permission for you child to be in the study because s/he is part of a team involved in the Imagine Tomorrow competition hosted by Washington State University. We are interested in collecting information from competition participants that might help explain why students do or do not pursue STEM experiences. Because your son or daughter is involved in a carefully planned and executed school project that is intended to be competitive at a state level, we are especially interested in learning about his/her perspective on STEM. Taking part in the study will take about 15 minutes and will be done once s/he arrives in Pullman. Your child cannot take part in this study if s/he does not attend the competition.

What will my child be asked to do if he or she is in this research study?
If your child takes part in the study, s/he will be asked to complete two questionnaires. One asks him/her to indicate to what extent a number of everyday activities seem enjoyable. Examples of these activities are helping children plan a Halloween party; meeting a new neighbor; and taking apart a computer. The second questionnaire asks about your child’s motivation for being part of the Imagine Tomorrow competition. In particular, this questionnaire is designed to tell us whether students get involved in Imagine Tomorrow because they think it is fun and enriching, or because they think they “should” be involved. Though neither questionnaire asks about anything that you would consider personal, your child will be told that s/he may skip any question that s/he does not want to answer, and s/he may stop at any time. There are a total of 39 questions across the two questionnaires, and it takes the typical person 15 – 20 minutes to complete both.

**Are there any benefits to my child if he or she is in this research study?**

At this time there is no direct benefit to your child from being in this study. However, we are hoping to turn this into a long-term project that would involve working with Imagine Tomorrow participants for a number of years, learning about the growth of their interests as they move through college or start a career. Also, the question of why American students do or do not pursue STEM careers is of major interest to educators and governments, and the results from this study will contribute to answering this question.

**Are there any risks to my child if he or she is in this research study?**

The primary risk to your child from taking part in this study is some discomfort with answering our questions. Though the questions do not ask about personal issues, it is possible that the occasional child will still find them intrusive. If this happens, we will suggest to your son or daughter that s/he just not complete the questionnaires. Whether a child responds to our questionnaires will be known only to us, not to his/her advisor or fellow team members, so there is no danger that s/he will be subjected to pressure to finish.

**Will information about my child be kept private?**

The data for this study will be kept private and confidential to the extent allowed by federal and state law. We will keep your child’s name with his/her responses, only because, if we do extend the project into the future, we would like to be able to follow up with your child and invite him/her to be involved in the long-term study. If s/he is involved, we would need to use his/her responses from this year’s session. Be assured that the questionnaires will be kept in a secure location, stored in a locked data archive room in the Department of Psychology. Access to the room is granted only by a Psychology Department administrator, and this person will be told that only Drs. Parks, Norton, and Bahr may have access to the files. We will not be able to share with you your child’s exact responses, but s/he will be provided, at checkout, with an information sheet explaining the goals of our study, and we will indicate that this sheet should be shared with you. You may also receive a sheet directly from Dr. Parks by emailing him at parkscd@wsu.edu.
The results of this study may be published or presented at professional meetings, but your child’s name will not be used or associated with the findings. The data for this study will be kept for 10 years.

**Are there any costs or payments for your child being in this research study?**

There will be no costs to you or your child for taking part in this study, nor will you or your child receive money or any other form of compensation for taking part in this study.

**What are my child’s rights as a research study volunteer?**

Your child’s participation in this study is completely voluntary. Your child may choose not to take part in this study, choose not to answer specific questions, or leave the study at any time. There will be no penalty or loss of benefits to which you or your child are entitled if you choose not to give your permission for your child to take part or your child withdraws from the study.

**Who can I talk to if I have questions?**

If you have questions about this study or the information in this form, please contact Dr. Craig Parks at parkscd@wsu.edu or at 509-335-8946. If you have questions about your rights or your child’s rights as a research participant, or would like to report a concern or complaint about this study, please contact the Washington State University Institutional Review Board at (509) 335-3668, or e-mail irb@wsu.edu, or regular mail at: Albrook 205, PO Box 643005, Pullman, WA 99164-3005.

**What does my signature on this consent form mean?**

Your signature on this form means that:
- You understand the information given to you in this form
- You have been able to ask the researcher questions and state any concerns
- The researcher has responded to your questions and concerns
- You believe you understand the research study and the potential benefits and risks that are involved for your child.
- You understand that even if you give your permission, you child may choose not to take part in the study.

**Statement of Consent**

I give my voluntary permission for my child to take part in this study. I will be given a copy of this consent document for my records.
Statement of Person Obtaining Informed Consent

I have carefully explained to the parent of the child being asked to take part in the study what will happen to their child.

I certify that when this person signs this form, to the best of my knowledge, he or she understands the purpose, procedures, potential benefits, and potential risks of his or her child’s participation.

I also certify that he or she:

- Speaks the language used to explain this research
- Reads well enough to understand this form or, if not, this person is able to hear and understand when the form is read to him or her
- Does not have any problems that could make it hard to understand what it means for his or her child to take part in this research.

Signature of Person Obtaining Consent

March 9, 2010

Date

Craig Parks

Principal Investigator

Printed Name of Person Obtaining Consent

Person’s Role in Research Study