#### Appendix F

**Plymouth State University**

**Institutional Review Board**

 Sample Informed Parental Consent Letter

**Instructions:** Replace red type with appropriate information and print letter on department or personal letterhead.

Date:

Dear Parent,

I am (insert your position at the University, e.g., a faculty member in the "x" department at PSU) and I am conducting a research project to find out (insert purpose of the research). I am writing to invite your child to participate in this project. I plan to work with approximately (insert anticipated number of participants) children in this study.

If you allow your child to participate in this study, your child will be asked to (insert description of what participants will be expected to do and anticipated time commitment. If audio or video recording, explain the purpose of the recordings and how they will be used). Neither you nor your child will receive any compensation to participate in this project (if there is compensation, modify this sentence stating the type and amount of compensation, and any conditions that need to be met to receive the compensation).

The potential risks of your child participating in this study are (insert any potential risks; if risks are anticipated to be minimal, state this). Although your child is not expected to receive any direct benefits from participating in this study (if direct benefits to participants are anticipated, modify this part of the sentence accordingly), the benefits of the knowledge gained are expected to be (state the benefits of the study at the community and/or societal levels).

Participation is strictly voluntary. If you refuse to allow your child to participate, neither you nor your child will experience any penalty or negative consequences. Your child may refuse to answer any question. If you allow your child to participate in this project and your child wants to, and then either you change your mind or your child changes his/her mind, you may withdraw your child, or your child may withdraw, at any time during the study without penalty (modify the latter sentence if there are conditions to receive compensation).

I seek to maintain the confidentiality of all data and records associated with your child’s participation in this research. (If your study involves personally-identifiable information, include the following two sentences.) You should understand, however, there are rare instances when I am required to share personally-identifiable information (e.g., according to policy, contract, regulation). For example, in response to a complaint about the research, officials at the Plymouth State University, designees of the sponsor(s), and/or regulatory and oversight government agencies may access research data. (If your study may lead to disclosure of information covered by New Hampshire mandatory reporting laws, such as suspected child abuse and/or neglect, include the following sentence). You also should understand that I am required by law to report certain information to government and/or law enforcement officials (e.g., child abuse, threatened violence against self or others, communicable diseases). (If your study involves transmitting data via email or the Web [e.g., Web-based survey], include the following sentence.) Further, any communication via the Internet poses minimal risk of a breach of confidentiality. (If your study involves focus groups, include the following sentence.) While I plan to maintain confidentiality of your child’s responses, other focus group participants may repeat responses outside the focus group setting. I will keep data on a password protected computer; only I will have access to the data modify these sentences to reflect actual situation; identify everyone named in the application with access to the data; if applicant is a student, the faculty advisor must have access to data; explain if deidentified data may be shared with other researchers). (If audio and/or video recording, explain how and where recordings will be stored, and what will happen to them during and after the study [e.g., transcribed and then destroyed].) I will report the data (explain how data will be reported [e.g., in aggregate, using pseudonyms]). The results may be used in reports, presentations, and publications (modify this sentence to reflect how the results may be used).

If you have any questions about this research project or would like more information before, during, or after the study, you may contact **(insert name of contact person, phone number and/or email address).** If you have questions about your child’s rights as a research subject, you may contact Dr. Clarissa M. Uttley, PSU IRB Chair at 603-535-2915 or psu-irb@plymouth.edu to discuss them.

I have enclosed two copies of this letter. Please sign one indicating your choice and return in the enclosed envelope. The other copy is for your records. Thank you for your consideration.

Sincerely,

Researcher’s name

Researcher’s title/position

Yes, I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_consent/allow my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in this research project.

No, I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_do not consent/allow my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in this research project.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent Date