***Sample Consent to Participate Form for Minors***

***(If you use this form remove the red material.)***

**Consent FOR MINORS to Participate in Research**

**Southwestern College**

**PRIMARY INVESTIGATOR:** Jane Eyre, Ph.D., Professor of Psychology, Southwestern College, Winfield Kansas (620-555-5555)

**TITLE OF STUDY:** Classroom Behavior and Rewards

**PURPOSE:** Your child, or the minor under your legal guardianship, will be asked to complete questionnaires for a research study on classroom behavior and rewards. The researchers will also record changes in classroom behavior based on whether a reward of 10 minutes extra recess time is given. We hope to gain from this study a more accurate picture of whether or not a reward system improves classroom behavior.

**PROCEDURES:** Children will complete five minute questionnaires at the end of each day for three weeks. The researchers will also record changes in classroom behavior based on whether a reward of 10 minutes extra recess time is given, but this will not require any effort or time from the children.

**TIME INVOLVED:** We anticipate this study to take approximately 10 minutes per school day for three weeks.

**RISKS:** We do not anticipate any risk of serious physical or psychological harm as a result of participating in this study.

**BENEFITS:** By participating in this study, your child or the minor under your legal guardianship will have contributed to advancing our knowledge of some of the factors that affect classroom behavior. In addition, all participants in the study will receive a debriefing, and overall results of the experiment will be made available upon request.

**CONFIDENTIALITY:** The identity of the participants will be known only to the researchers involved in the study. Participants will be specifically requested not to enter their name or any other identifying marks on any materials. Because this consent form will be returned separately from the study materials, the name and responses will never be linked. All names and responses will be held in the strictest confidence to the full extent of the law. However, absolute confidentiality cannot be guaranteed, since research documents are subject to subpoena.

**RIGHT TO REFUSE OR WITHDRAW:** The participation of your child or minor under your legal guardianship in this study is voluntary. You may refuse to allow the minor to participate at this point or change your mind about participating in this study at any point along the way. No one will be penalized in any way for a decision to withdraw from the study.

**QUESTIONS:** If you have any questions about this study, please ask the experimenter. If you have additional questions later, or if you want to receive a summary of the results of the study, you may contact Dr. Jane Eyre, 657 Mossman Hall, Southwestern College, Winfield, KS 67156-2499, 620-555-5555 or at JaneEyre@mail.edu.

**Your signature below will indicate that you have decided to allow the minor named below to be a research participant and that you have read and understood the information provided above.**

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(Printed Name of Minor) (Printed Name of Parent/Legal Guardian)

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(Signature of Parent/Legal Guardian) (Date)