

Student: Assent Form

Title of the Study: The Thriving Classroom: Strengths-Based Professional Development for Educators

Sponsor: Mayerson Academy

Principal Investigator: Mark Linkins

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You are invited to participate in a research study. After reading this form, you can decide to be in the study or you can decide not to be in the study. Either choice is OK. If you decide to start the study and then change your mind, you can stop being in the study at any time.

Please ask the principal investigator or study staff to explain anything you do not understand. They will answer all the questions you have. You can ask questions about the study at any time.

If you want to talk to the investigator alone please ask.

DESCRIPTION OF THE RESEARCH

The purpose of the study is to look at the results of the middle school's focus on character strengths. The research study is trying to help answer the following question:

Does the school's focus on character strengths help students to understand and effectively use their own strengths?

Participation in the study is open to Bethlehem Middle School students and staff members.

This study will take place at Bethlehem Middle School.

WHAT WILL MY PARTICIPATION INVOLVE?

If you decide to take part in this study, you will be asked to answer multiple-choice survey questions 3 separate times between now and 7/30/15. The survey will take about 15-20 minutes to complete each time you take it. The survey is not a test. There are no right or wrong answers; you will not be graded. The survey includes questions about what you see as your strengths and talents.

You may also be asked to take part in a group discussion (also called a focus group). The questions will ask for your feedback about the middle school's focus on character strengths. Discussion groups will include 5-10 students and are completely voluntary.

HOW WILL MY PRIVACY BE PROTECTED?

While there may be articles in books or magazines that tell about this study, your name (or other identifiable information) will not be known to the people who are writing about this study. .

You can stop doing the surveys or doing the group discussions at any time for any reason. No one will be angry or upset.

Are there benefits to taking part in the research?

You may not benefit directly from taking part in the study. But you may increase your awareness of your own character strengths.

Will what I say be kept private?

What you tell the people who are doing the study may be written down. What is written down about you will be seen by the people who are doing the study. People who make sure that the study is being done the right way may also see it. If the information about the study is sent anywhere else, it will not have your name on it.

Will I be paid for my participation in this research?

No.

What if I don't want to be in this research study?

If you do not want to be in this study, you do not have to take part.

If you decide to take part, you are free to stop at any time. If you wish to stop taking part in the study, please discuss with your parent or guardian and ask them to contact Mark Linkins to have you removed from the study or ask Mark Linkins or a study staff member yourself.

WHOM SHOULD I CONTACT IF I HAVE QUESTIONS?

You may ask any questions about the study at any time. If you have questions about the study after you leave today you should contact the Principal Investigator at the telephone number or email address listed on the first page of this form or ask your parents or guardian to contact the investigator for you.

Please sign this form and give it to your parent or guardian. You parent or guardian also has a permission form that must be signed and returned. He or she will return your form, along with the parent permission form.

By signing your name below you indicate the following:

1. You have read this consent form.
2. You have had an opportunity to ask any questions about your participation in this research.
3. You are voluntarily agreeing to participate in the study.

If you decide to participate and your parent or guardian provides permission, you/your parent or guardian will receive a copy of this signed and dated form for your records. You will also be given your personal classified ID number.

Name of Participant (please print): _____

Signature of Participant

Date