

APPENDIX H: SAMPLE PARENTAL INFORMED CONSENT

Parental informed consent is required for participation of minors in research (sample below) unless waived by the IRB. Each research project is unique and the informed consent form should be customized to your study.

Date XXX

Dear Parent(s),

I will be conducting a study in our classroom to determine [briefly discuss purpose here]. The study will last XXXXXXXXXXXXXXXXXXXXXXXX. This is a part of my final research project for my master’s degree at Concordia University Irvine, CA.

I am writing to ask permission to use the data I collect from your child during this process. Participation in this study involves XXXXXXXXXXXXXXXXXXXXXXXX.

XXXXXXXXXXXXXXXXXX (type in the name of the institution’s administrator) has approved this study for implementation at XXXXXXXXXXXXXXXXXXXX (type name of institution).

The significance of the study is XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX.

The benefits to your child for participating in this study include XXXXXXXXXXXXXXXX.

Only XXXXXXXXXX , —my University Supervisor—and I will have access to your child’s identity and to information that can be associated to your child’s identity. The data and documentation will be destroyed by XXXXXXXXXXXXXXXX (type in date).

Use of data from your child is voluntary. You may contact me at any time regarding your child’s participation. My phone number is XXXXXXXXXXXXXXXX and my e-mail is XXXXXXXXXXXXXXXX.

Sincerely,
XXXXXXXXXXXXXXXXXX

Please check the appropriate box below and sign the form:

- I give permission for my child’s data to be used in this study. I understand that I will receive a signed copy of this consent form. I have read this form and understand it.
- I do not give permission for my child’s data to be included in this project.

Student’s Name: _____

Signature of Parents/Guardian: _____

Printed Name of Parents/Guardian _____

Date _____