Model consent form for use with sensitive populations, revised for ESL model

#### Be part of an important project Preferred language learning activities (A hypothetical model)

(Your name) from Portland State University's Teaching English as a Second Language Program is doing a research study on which activities are most effective in helping students learn language. (Describe project **briefly** here.)

#### What will I have to do?

If you decide to take part in this project, we will:

- \$ Ask you to take a survey at a time when it is convenient for you. This survey will take you about 30 minutes to complete.
- **\$** Have you take part in an activity during your regular class time designed to teach you something about English. This activity will take about 15 minutes.
- **\$** Record you with audio tape while you are taking part in the language learning activity.

## Why have I been asked to take part in this study?

You have been asked to take part in this study because you are taking a language class in the Intensive English Language Program. You do not have to take part in this study.

#### Are there any risks?

If you take part in this study:

- **\$** There is a small risk that someone will learn your name and find out what your answers are. We make sure that we do everything possible to protect your name and identity.
- \$ There is a small risk that you will feel uncomfortable answering some of the questions. You may skip any question you do not want to answer.
- **\$** There is also a small risk that you will become frustrated or embarrassed when taking part in the language learning activity. If this is the case, you may stop the activity at any time.

## What are you doing to protect me?

Your privacy is very important to us. We have done several things to protect you:

- **\$** We won't tell anyone if you take part in this study or not.
- \$ Your answers on the survey will be kept confidential to the extent allowed by law. This means that the names of the people who take part in the study will not be given to anyone else. We will only reveal what you say or do in a way that no one could ever guess or know it was you who said that.
- \$ The audio tapes will be kept in a locked drawer and will only be heard by the researchers on this project. When we write down what you said, we will replace all the names with code names so that no one can know who said or did what.
- Your name and other personal information will be kept locked so that no one other than the researchers will be able to see it. We need to this information to keep track of who participated. For example, this form will be kept in a locked cabinet because it has your name on it.
- **\$** When we write or talk about what we learned in this study, we will use code names and leave things out so that no one will be able to tell who we are talking about.

Model consent form for use with sensitive populations, revised for ESL model

#### What will I gain by taking part in this study?

- **\$** You will not gain anything directly.
- \$ If you participate, you may be helping us learning how to become better teachers, and so help students in future courses.

### What happens if I decide not to take part in this study?

- **\$** You do not have to part in this study. Your participation is voluntary.
- **\$** You can change your mind and stop at any time, even if you first said yes.
- **\$** It will not affect your course grade if you say no.
- **\$** It will not affect your relationship with your teachers in the Intensive English Language Program and with Portland State University if you say no.
- **\$** Your relationship with the researcher (give name) will also not be affected if you say no.

# Any Questions?

If you have any questions about this study, this form or the project you can:

- **\$** Talk to the researcher (insert name and phone #)
- Contact the Chair of the Human Subjects Committee of Portland State University about your rights as a research participant. They can be contacted at:

Portland State University Cramer Hall, Room 111 1721 Broadway Ave. Portland, OR 97201. Telephone: 503-725-8182; e-mail: <u>hsrrc@lists.pdx.edu</u> Hours: 9:00 a.m. to 5:00 p.m., Monday through Friday

## If I sign, what does it mean?

This is a consent form. Your signature below means that:

- **\$** You have read and understood what this form says.
- **\$** You are willing to take part in the study by taking a survey and having us record you while you participate in a language learning activity.
- \$ You know that you do not have to take part in this study. And even if you agree, you can change your mind and stop at any time. No problem.
- **\$** If you take part in this study, it has nothing to do with your being part of the IELP program. If you agree to take part, or if you say no, they won't know and it won't matter. They will treat you the same.
- **\$** You will get a copy of this form to keep for yourself.

Date