

IUPUI and CLARIAN INFORMED CONSENT STATEMENT FOR

Evaluation of the Experiential Science Programs: Examining the implementation and outcomes of the Largest Classroom in Indiana and the Discovering the Science of the Environment

Teacher and Staff Consent

Your school is participating in a field-based science programs that are being evaluated by the Center for Urban and Multicultural Education at Indiana University-Purdue University Indianapolis. You were selected because you are the instructor for a class that is participating in an educational program. We ask that you read this form and ask any questions you may have before agreeing to participate in the study.

The study is being funded by two sources including the Indiana State Fair and Discovering Science and the Environment project at Indiana University-Purdue University Indianapolis.

STUDY PURPOSE

The purpose is to evaluate the impact of hands-on science experiences on students' interest in and knowledge of science concepts. The evaluation will also help improve the quality of the programs for students in Indiana and beyond.

NUMBER OF PEOPLE TAKING PART IN THE STUDY:

If you agree to participate, you will be one of **1000** subjects who will be participating in this research.

PROCEDURES FOR THE STUDY:

If you agree to be in the study, you will do the following things:

1. *Be observed as you participate in any training or institutes*
2. *Be observed when your class participates in the field-based science program.*
3. *Complete multiple administration of a survey regarding your experiences with the program. This should take 20 minutes per administration (pre-test, post-test, and follow-up).*
4. *Depending on the schedule of the field experience, you may be randomly selected to participate in an interview/focus group about your experience in the program. The interview and/or focus group will last about 15 minutes. The focus groups will be audio recorded so that the researcher can further assess the information.*
5. *Work with staff/evaluators to develop/select assessment items to measure science concepts covered in the field-based program.*

RISKS OF TAKING PART IN THE STUDY:

This study involves minimal risk, that is, no risk to your physical or mental health beyond those encountered in the normal course of everyday life. However, you may be uncomfortable with some of the questions in the focus group and there is a risk of loss of confidentiality.

BENEFITS OF TAKING PART IN THE STUDY:

Positive benefits to your participation in this study may include professional development as a science educator and an increased interest in teaching science.

ALTERNATIVES TO TAKING PART IN THE STUDY:

The only alternative is not participating in the study.

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CONFIDENTIALITY

Efforts will be made to keep your personal information confidential. We cannot guarantee absolute confidentiality. Your personal information may be disclosed if required by law. Your identity will be held in confidence in reports in which the study may be published.

Organizations that may inspect and/or copy your research records for quality assurance and data analysis include groups such as the study investigator and his/her research associates, the IUPUI/Clarian Institutional Review Board or its designees, study sponsor, and (as allowed by law) state or federal agencies (specifically the Office for Human Research Protections (OHRP)).

COSTS

There are no costs associated with your participation.

PAYMENT

You will not receive payment for taking part in this study.

CONTACTS FOR QUESTIONS OR PROBLEMS

For questions about the study or a research-related injury, contact the researcher Joshua Smith at jss2@iupui.edu or 317-274-6843. If you cannot reach the researcher during regular business hours (i.e. 8:00AM-5:00PM), please call the IUPUI/Clarian Research Compliance Administration office at 317-278-3458 or 800-696-2949.

In the event of an emergency, you may contact Joshua Smith at 317-274-6843.

For questions about your rights as a research participant or to discuss problems, complaints or concerns about a research study, or to obtain information, or offer input, contact the IUPUI/Clarian Research Compliance Administration office at 317-278-3458 or 800-696-2949.

VOLUNTARY NATURE OF STUDY

Taking part in this study is voluntary. You may choose not to take part or may leave the study at any time. Leaving the study will not result in any penalty or loss of benefits to which you are entitled.

SUBJECT'S CONSENT

In consideration of all of the above, I give my consent to participate in this research study.

I will be given a copy of this informed consent statement to keep for my records.

SUBJECTS SIGNATURE: _____ Date: _____
(must be dated by the subject)

SUBJECT'S PRINTED NAME: _____

SIGNATURE OF PERSON OBTAINING CONSENT: _____ Date: _____

IRB Approval Date: April 15, 2009
Continuing Review Date: April 15, 2010