



INFORMED CONSENT FORM - PARENTS

Project Title: Project GPS
Principal Investigator: Richard M. Lerner, Tufts University
Version Date: October 28, 2010

What is the purpose of this form?

This form contains information you will need to help you decide whether to be in this study or not. Please read the form carefully and ask your mentor questions about anything that is not clear.

Why is this study being done?

Your child is invited to participate in a study to test the merits of a teaching tool that will be used by youth-serving professionals to educate young people about strategies that are useful for setting and achieving their goals. These strategies, which we are calling "GPS", which stands for **G**oals, **P**ursuit strategies, and **S**hifting Gears, have been linked to positive outcomes in youth across the nation.

Over 1000 youth will be invited to participate in this study.

Why am I being invited to take part in this study?

Your child is being invited to participate in this study because he or she takes part in a youth mentoring organization. Both your child and your child's mentor will participate in the study.

Your child's mentor will participate in the study. The mentor will complete the same survey about your child. As your child and his/her mentor work on goals over a nine-month period, they will both complete the survey three times. In addition, they will use some activities that are related to goal directed skills.

What will happen if I take part in this study?

Your child will be asked to complete an online survey three times. Each time, it should take less than 45 minutes to complete. The first part is a number of scales that will ask their ratings on the strategies that they use to achieve goals. The second part is several scales that will ask how they think they are doing in a variety of different areas, for instance, in academic skills or in connection with a community.

What are the risks and possible discomforts of this study?

There is very minimal risk to your child for participating in the study. The only possible foreseeable risk is that your child may feel uncomfortable with some of the questions as some questions deal with personal topics (for example, questions about your child's views about his or her future). Although we would like your child to answer all the questions, participants are free to skip any questions they don't want to answer.

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What are the benefits of this study?

This study is based on research evidence that suggests that youth who have strong goal-management abilities also develop positively. Your child's participation in this study may improve his or her goal-management abilities, which may also improve their success in a number of areas. Additionally, your child's participation in this study will improve the program for the future, as it may be used across the country.

Will I be paid for participating in the study?

Every person who fully completes the study will be mailed a \$50 gift certificate from Target or another regional retail outlet. The gift cards can be used at retail stores and online.

Who is paying for this study?

This study is being conducted in partnership with Dr. Richard Lerner at Tufts University. The study is made possible in part through a grant from the Thrive Foundation for Youth.

Who will see the information my child provides?

The information your child provides will not be seen by his or her mentor or organization. The information your child provides during this research study will be kept confidential to the extent permitted by law. Research records will be stored securely and only researchers at Tufts University will have access to the records.

None of the records will contain your child's name in a way that can link any particular record directly to your child. Your child's record will be given a unique identification number in order to match your child's responses to those of his or her mentor. Only the research staff at Tufts will have access to the information that matches your child's ID number to his or her name.

The results of the study may be shared with the Thrive Foundation, and /or be published in academic journals or presented at conferences. Only group data will be reported; your child's individual responses will not be singled out in any way.

What other choices do I have if I do not wish to take part in the study?

Your child's participation in this study is voluntary. If you decide to allow your child to participate, he or she is free to withdraw at any time without penalty. Furthermore, your child may choose not to answer any question he or she does not wish to. You and your child will not be treated differently if you decide to stop taking part in the study, and your participation in your program will not be affected in any way. If you choose to withdraw from this project before it ends, the researchers may keep information collected about you and this information may be included in study reports.

Who do I contact if I have a question?

If you have any questions about the research project, please contact:
Dr. Edmond Bowers, Research Assistant Professor at Tufts University
617-627-4489
Ed.bowers@tufts.edu

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YOUR SIGNATURE INDICATES THAT THE RESEARCH STUDY HAS BEEN EXPLAINED TO YOU, THAT YOUR QUESTIONS HAVE BEEN ANSWERED, AND THAT YOU ARE AGREEING TO YOUR CHILD'S PARTICIPATION IN THE STUDY

WHAT DOES MY SIGNATURE ON THIS CONSENT FORM MEAN?

This form contains all the information you need to know in order to make an informed decision about whether or not to allow your child to participate in this study. Your signature indicates that this study has been explained to you, that your questions have been answered, and that you agree to allow your child to take part in this study. You will receive a copy of this form.

Your Child's Name (printed): _____

Your Name (printed): _____

(Signature of Parent/Guardian/Authorized Representative) (Date)

THANK YOU. PLEASE RETURN THIS LAST PAGE TO THE PARTICIPATING MENTOR.

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