

IRB instructions for use of this template:

- *This template is for studies that involve recruiting participants who are minors (under the age of 18) and therefore require parental consent in order to participate. This is an example of the MINIMUM requirements for a parental consent letter. Whenever possible, the standard written parental consent template should be used (on the Forms and Templates page of the IRB website). However, a request to waive the standard requirements will be considered in cases when the parents of the potential study participants might be educationally disadvantaged or speak English as a second language.*
- *Please make every effort to keep this parental consent letter to 1 page.*



Dear Parent or Guardian,

We are requesting that you allow your child to participate in a study about *[brief description of the topic]*. This may help *[state possible benefits, if applicable]*.

If your child participates in the study they will be asked to *[explain procedures and tasks; identify any procedures that are experimental; describe length of time for participation, frequency and duration of procedures; etc.]*

- *[Please include a few examples of the topics that will be covered in your study. Be sure to identify any topics that are different from what a participant might discuss in their day-to-day lives. Please mention anything that could potentially cause: emotional distress, risk to reputation (social risk), or physical discomfort].*

Children who complete at least ... *[Please describe any compensation for participation]*.

There are a few other things we want you to know about the study. Participants will be informed that their responses will be kept confidential *[include if applicable]*. *[Describe how the data will be stored and protected. Explain any plans to report the information collected]*.

[Explain any possible risks and any expected benefits.]

For example: We believe there are no physical risks and *minimal/no* emotional risks involved for children who participate in this study. Children often talk with each other about their experiences with fellow students and teachers in everyday conversation. However, your child may become upset while *[explain possible upsetting topics/tasks]*. It is also possible that they may feel tired after completing the study because of the amount of time involved. The research team is experienced in assisting children with these issues if they should arise. It is also possible that your child may feel empowered by sharing their experiences with the researchers.

Participation in the study is voluntary (meaning you do not have to allow your child to participate). You may choose which component(s) of the study you will allow your child to participate in by checking the appropriate box below:

(time commitment) survey/game *(time commitment) interview* Both Neither

Your child will also be given to opportunity to agree or not agree to participate in any part of the study. You and/or your child are free to discontinue their participation at anytime.

If you have questions about the study, feel free to contact *name of investigator*, the person in charge of the study, at *investigator's contact information* *[if a student, add: "or the faculty advisor for this study, name, email/phone"]*. If you have any complaints about the study you can contact the Smith College Institutional Review Board, at

irb@smith.edu or 413-585-3562 or by completing a Participant Complaint Form at <https://www.smith.edu/academics/institutional-review-board/compliance>

Consent: Your signature below indicates that you have read and understand the information provided above and consent to allow your child to participate in this study.

Parent's Name (print)

Child's Name

Parent's Signature

Date