

## Parent/Guardian Informed Consent Agreement

Please read this consent agreement carefully before you decide to participate in the study. Your child will also receive an assent form; please review the assent form with your child.

Dear Parent of Student:

We write to request permission for your child to participate in our research study. We obtained your child's name from the College Board, which provided a list of students for possible inclusion in the project from the State of Virginia

**Purpose of the research study:** The purpose of our research project is to understand how students make decisions about where to apply to college and where to attend college. We are interested in understanding the information that students bring to the college application process about the range of choices and the availability of financial aid. We are also interested in the extent to which the provision of additional information about college choices and financial aid, combined with reminders about the steps necessary to complete the college application process, would affect where students apply to college, where they are admitted, the range of financial aid offers, and where (and whether) students choose to attend college.


The goal of this project is to produce academic research papers. Data collected for the project will only be used for research purposes and individual data will not be shared with the College Board or any college admissions offices.

**What your child will do in the study:** Participants will complete a brief survey, estimated to take about 45 minutes. The survey asks your child for information about high school courses and grades, extracurricular activities and work experience, preparation for the college application process, and the institutions to which the student applied and associated admission and financial aid outcomes. Your child may opt to be contacted at the conclusion of the study for a brief, 20 minute telephone interview.

**What you will do in the study:** Granting permission for your child's participation by returning this signed consent form in the postage-paid return envelope we have provided is all that is requested of you. Parental participation is not required in this study. Your child may, however, request help with some survey questions, such as those regarding college financial aid.

**Time required:** The study will require from 45 to 65 minutes of your child's time. It should take approximately 45 minutes to complete the survey. Students may also choose to participate in a 20 minute telephone interview at the conclusion of the survey period, but are not required to do so as part of the survey process.

**Risks:** Participants will be asked questions about their SAT scores, financial aid offers, and experience completing a FAFSA form. It is possible that some participants will feel frustration or discomfort answering such questions.

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Approved	from: 5/08/09	to: 2/19/10
SBS Staff		

**Benefits:** There are no direct benefits to you or your child for participating in this research study. The data collected in the survey will help further the researchers' understanding of how students decide which colleges to apply to and how the availability of financial aid affects those decisions.

**Confidentiality:** Your child's participation in this study will remain confidential. We will assign each child an ID number so that no personal information will be revealed. The code linking your child's identity will be kept by the assistant working with the principal investigators to allow for internal assessment and evaluation of the program. It will be stored in a secure file and destroyed when data analysis is complete. Researchers will work with data that does not identify you or your child. Your child's answers will not impact any college admissions or financial aid decisions. Your names will be not be revealed in any analysis of the data to further protect your privacy. The raw data, stripped of all identifiers, will remain with researchers for no longer than 10 years in order to analyze the data for future projects.

**Voluntary participation:** Your child's participation in the study is completely voluntary.

**Right to withdraw from the study:** You have the right to withdraw your child from the study at any time without penalty

**How to withdraw from the study:** Your child's participation in this study is completely voluntary, and your child may skip any questions on the survey without penalty. **Your child may withdraw from the study at any time without penalty.** Your child may withdraw by informing the researcher that s/he no longer wishes to participate (no questions will be asked). The decision to participate or not participate will in no way affect the relationship you or your child has with the University of Virginia or Harvard University.

**Payment:** A \$2 cash payment will be included with the mailed survey as demonstration of good faith. After completion of the survey, a small token (\$10 gift card) will be provided to all who have returned completed surveys (May 2009).

**If you have questions about the study, contact:**

Sarah Turner, 434-924-7857, [sturner@virginia.edu](mailto:sturner@virginia.edu)

Christopher Avery, 617-496-4063, [Christopher\\_avery@ksg.harvard.edu](mailto:Christopher_avery@ksg.harvard.edu)

**If you have questions about your rights in the study, contact:**

Tonya R. Moon, Ph.D.,

Chair, Institutional Review Board for the Social and Behavioral Sciences

One Morton Dr Suite 500


University of Virginia, P.O. Box 800392

Charlottesville, VA 22908-0392

Telephone: (434) 924-5999

Email: [irbsbshelp@virginia.edu](mailto:irbsbshelp@virginia.edu)

Website: [www.virginia.edu/vprgs/irb](http://www.virginia.edu/vprgs/irb)

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Please sign and return this page in the postage paid envelope provided. Alternately, you may see the project materials and complete this form from the study website at <http://www.virginia.edu/surveys/college>. You may directly access the site for the Center for Survey Research and the University of Virginia from this address.

**Agreement:**

I agree to allow my child to participate in the research study described above.  
I agree to participate in the research study described above.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

To assist us in contacting your child, we would appreciate if you would provide us with the following information about them:

\_\_\_\_\_  
Child's Primary Phone Number

cell  
 home  
 other

\_\_\_\_\_  
Child's Alternate Phone Number

cell  
 home  
 other

\_\_\_\_\_  
Child's email

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