



Department of Psychology  
Mail Stop #948  
2801 West Bancroft Street  
University of Toledo  
Toledo, Ohio 43606-3390

### PSYCHOLOGY RESEARCH PERMISSION FORM

#### Key Information:

- Your child is being invited to participate in psychology research as a course requirement
- The purpose is to expose students to research in the field of psychology
- This research will take place in University Hall labs or online, will consist of surveys, interviews, and other methods, and will take anywhere from 30 minutes to 3 hours
- Your child has the option to complete written research reports instead
- There are potential risks, including loss of confidentiality
- Your child may benefit from participation in this research by learning how psychology research is done
- Your child's participation in this research is voluntary

**Research System Coordinator:** Jason Rose, Ph.D., Associate Professor, 419-530-2278

**Purpose:** Your child is being invited to participate in psychology research as part of their Principles of Psychology course. This research is being conducted at the University of Toledo under the coordination of Dr. Jason Rose, The Psychology Department research coordinator. The purpose is to expose students to the research being done in the field of psychology. All research projects are overseen by an experienced faculty member. Additionally, all research projects will have received approval from the University's Institutional Review Board; the Committee responsible for ensuring the protection, rights, and ethical treatment of human subjects in research.

**Description of Procedures:** Your child will be asked for the permission to participate in this research. This research will take place in University Hall (or online) and will last anywhere from 30 minutes to 3 hours. Students will be asked to perform activities such as filling out surveys on a computer, completing personality inventories, and evaluating videos. Students will not have access to view any of these separate studies without this signed parental permission form.

Some research projects may involve video or audio recordings. These recordings will only be used for research purposes and files will be stored in secure locations (e.g., on password-protected computers, locked rooms on campus). Will you permit the researcher to video or audio record your child during the research?

YES	<input type="text"/>	NO	<input type="text"/>
	Initial Here		Initial Here

**Potential Risks:** There are minimal risks to participation in these studies including loss of confidentiality and discomfort from answering certain questions. Before participating, students will have the opportunity to read an assent form, similar to this parent permission form, to learn more about the research and decide if they want to participate. Participation is voluntary and your child can withdraw participation at any point within each study without incurring any penalty.

Study Number: 300318-UT  
Approval Date: 08/07/2019

**Potential Benefits:** Students who participate in this research will learn about how psychology experiments are run and may learn more about the subject of the particular research they complete. Others may benefit by learning about the results of this research. Students will earn research credit in their course for participating. If your child decides not to participate, he/she will not receive research credit.

**Alternatives to Research:** If your child has questions or concerns about a specific study, you should encourage him/her to discuss the details with you before deciding to participate. If your child decides not to participate in research and/or you decide not to sign this permission form, he/she can still receive credit through alternatives such as writing reports about research articles in psychology. The reports are designed to be equivalent to participating in research in terms of the overall time commitment (e.g., 1 report = 1 hour) and exposure to knowledge about the research process in psychology. The course syllabus has more information about the research requirement and its alternatives.

**Confidentiality:** The researchers will make every effort to prevent anyone who is not on the research team from knowing that students provided information for a particular study, or what that information is. The assent forms with signatures will be kept separate from responses, which will not include names and which will be presented to others only when combined with other responses. Although researchers will make every effort to protect students' confidentiality, there is a low risk that this might be breached. The information that is collected from your participation in this research will not be used or distributed for future research.

The information that is collected from your child's participation in this research may be used in future research studies without your permission. This will only occur if the information collected is anonymous or after all identifying information has been removed. If you do not grant permission for your child's data to be used for future research purposes, they will not be eligible to participate in psychology research opportunities. As a reminder your agreement to allow your child to participate in research is voluntary.

**Voluntary Participation:** Your refusal to permit your child to participate in research will involve no penalty or loss of benefits to which he/she is otherwise entitled and will not affect his/her relationship with The University of Toledo or any of your child's classes. Likewise, your child's refusal to participate in a particular study will involve no penalty or loss of benefits to which they are otherwise entitled and will not affect their relationship with The University of Toledo or any of their classes. They may skip any questions they are uncomfortable answering. They may discontinue participation at any time without any penalty or loss of benefits. If your child decides to withdraw, he/she will still receive research credit. As a reminder, your child's agreement to participate in this research is voluntary

**Contact Information:** Before students decide to accept any invitation to take part in a study, they may ask any questions that they might have. If you have any questions regarding the psychology research requirement at any time, you should contact the research system coordinators (Dr. Rose, 419-530-2278). If you have questions beyond those answered by the research team or rights as a research subject or research-related injuries, please feel free to contact the Chairperson of the SBE Institutional Review Board in the Human Research Protection Program(419) 530-6167.

**SIGNATURE SECTION – Please read carefully**

You are making a decision whether or not to grant your child consent to participate in psychology research. Your signature indicates that you have read the information provided above, you have had all your questions answered, and you have decided to allow her or him to take part in this research.

_____	_____	_____
Name of Student (please print)		
_____	_____	_____
Name of Parent/Guardian (please print)	Signature	Date