Parental Informed Consent Form

Title of Research: Students' Multiple Intelligence Profile Strengths and the Relationship of the Strengths to Students' Standardized Test Scores, Report Card Grades, Participation in Extra Curricula Activities, Peers' Perceptions of them and Self-Perceptions

I. Federal and university regulations require us to obtain signed consent for participation in research involving human participants. After reading the attached letter and statements in section II through IV below, please indicate your consent by signing and dating this form.

II. Statement of Procedure: Thank you for your interest in this research project being conducted by Researcher's Name, a teacher in the Okaloosa School District and a doctoral student at the University of West Florida. Hopefully, the introductory letter, enclosed with this consent form, explained the research project. This stage of the research project involves my administering the *Multiple Intelligence Developmental Assessment Survey (MIDAS*) to your child. This will be done in a group setting in your child's classroom. The major aspects of the study are described in the statements below, including the risks and benefits of having your child participate. Your child's information will be kept in strict confidence with only you, your child and school personnel having access to the results of the *MIDAS* instrument.

I understand that:

(1) My child will be administered the commercially produced *Multiple Intelligence Developmental Assessment Survey (MIDAS*) for kids or teenagers, depending on the age of my child and the length of the test will be approximately 30 to 45 minutes.

(2) My child's *Florida Comprehensive Achievement Test (FCAT)* scores will be recorded by the researcher and compared to his/her *MIDAS* results.

(3) My child's report card grades will be recorded by the researcher and compared to his/her *MIDAS* results.

(4) My child will complete a researcher developed survey and questionnaire developed for the purpose of gathering information related to my child's extra curricula activities and his/her perceptions of classmates' multiple intelligences strengths.

(5) The researcher will share study results, pertaining to my child, with me if I wish. I will indicate my request for a conference with the researcher by checking the appropriate space at the end of this consent form.

(6) After the data are gathered, my child's name will be replaced with an identifying code known only by the researcher. At no time will my child's name be referenced in the study results and/or reports.

(7) I may discontinue my child's participation in this study at any time without penalties or repercussions.

III. Potential Risks of the Study:

(1) There are no foreseeable risks involved with the study.

IV. Potential Benefits of the Study:

(1) Data obtained from this study may provide educational professionals information that would allow them to better facilitate learning experiences for study participants.

(2) Information obtained from this study may provide parents with an appreciation of their child's profile strengths and enable them to become stronger advocates for their child's educational experiences.

(3) Students may gain a greater respect for the learning profiles of their classmates as well as themselves.

(4) Comparison of data should give educators additional information about students specific profile strengths.

V. Statement of Consent: I certify that I have read and fully understand the Statement of procedure given above and agree to have my child participate in the research described therein. Permission is given voluntarily and without coercion or undue influence. It is understood that I may discontinue participation at any time. I will be provided a signed copy of this consent form.

Please schedule a time for me to review my child's assessment results. _____yes _____no

I understand that the data will not be compiled before school is out and my conference will occur during the summer break.

If you have any questions or concerns please call Researcher's Name, the researcher, at (850) 555-5555 or (850) 555-5555

_____ _____

Participant's Name (Please Print) Date

_____ _____

Parent's Signature Phone