Stellar Girls Acknowledgment of Parental Consent

Section I: Identification of Project and Responsible Investigator:

I hereby agree to allow my daughter to participate in a research project entitled Stellar Girls to be conducted by the iBIO Institute EDUCATE Center.

Section II: Participant Rights and Information:

1. Purpose of the Project:

The Stellar Girls project intends to introduce middle-school aged girls to current, interesting "Big Ideas" in STEM fields. Students will interact with STEM professionals and corporate volunteers from iBIO member companies, learn about STEM careers, apply STEM skills to real-world problems and employ critical thinking skills through team collaboration. The program will develop educators' abilities to become teacher-leaders who expand the program within their own schools, districts and regions. The evaluation research will look at ways that teachers can improve their ability to teach their students and will look at the ways in which the students respond and improve their understanding for science concepts. Your daughter will be part of the project during the next 10 months, from September 1, 2015 to June 30, 2015. If you choose to allow your daughter to participate she will take part in an after school program that involves about 30 hours during the school year. She will be asked to complete content-related tests and surveys, and will be monitored by program staff using an observation protocol. All procedures are standard approaches to evaluation and are common educational practices.

2. Description of Risks:

There are no foreseeable risks to your daughter's involvement with this program. Your daughter may be uncomfortable if she has difficulty taking tests. If she needs additional help with the tests or surveys, please ask her teacher for an accommodation. Your daughter's decision to be involved or not to be involved in this program will not affect her grades. All research activities are consistent with common professional development practices for students.

3. Description of Benefits:

You daughter will directly benefit through the ability to have additional access to science teacher expertise and resources. It is our intent to provide your daughter with opportunities to learn scientific concepts, meet scientists, and professionals in the field with the overall goal of making science more approachable. We believe that this will lead some of the girls in the program to eventually choose a career in science. Generally, your daughter's participation in the research project will assist the researchers with a better understanding for how an after school program focused on science concepts can positively affect girls science self-efficacy.

4. Disclosure of Alternative Procedures:

If you choose not to allow your daughter to participate in the research project, she will not be tested.

5. Confidentiality of Records:

The records of this study will be kept private. The iBIO Institute EDUCATE Center will retain the names of the girls involved with the project, but will not have access to the data collected. All data collected will use a confidential project identifier. The data will be gathered and analyzed by an independent researcher, Dr. Matt Feldmann of Goshen Education Consulting, Inc. In any sort of report we might publish, we will not include any information that will make it possible to identify you or your daughter.

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6. Contact Information:

Section III: Signatures

If you have any questions about our research project or about your rights and activities as a participant, then please contact the project director, Karen Lindebrekke. You can call Ms. Lindebrekke at 312-422-1111, email her at karen Lindebrekke@ibioinstitute.org or write her at 65 East Wacker Place, Suite 1600, Chicago, IL 60601. You also may contact the principal investigator, Dr. Matt Feldmann at (618) 751-2807, e-mail him at gosheneducation@gmail.com, or write him at 316 Shea Court, Edwardsville, IL 62025. If your daughter becomes worried about her emotional and physical responses to the project's activities, then we encourage you to immediately notify your presenter and Ms. Lindebrekke. They will work with you to help identify the problem and solve it. If you have any questions about your rights or any other concerns, you may also contact Mona Bosch, of Ethical & Independent Review Services, who can be reached at (816) 421-0008, ext. 103, by email at: monab@eandireview.com, or by mail at: Midwest Office, 14400 E. 42nd St., Suite 240, Independence, MO 64055

7. Statement of Voluntary Participation:

Your daughter's participation will be voluntary. You can ask to withdraw from the project at any time. We will stop keeping records of your daughter's participation and her records will be deleted.

A copy of this signed consent form will be provided to you upon request.

Your daughter's name:		
Your name (please print):		
Your signature:	Date:	
Project Director	Date:	