



Parent or Guardian Minor Consent Form

Dear Parent or Guardian:

There are many STARTALK programs across the United States. The National Foreign Language Center (NFLC) supports these programs. One of the NFLC's jobs is to collect information about participants. To collect this information, NFLC surveys all participants. The survey asks about language learning experiences and attitudes about language learning. NFLC will use the answers to these questions to make future STARTALK programs and language programs across the country better.

During the STARTALK program your child may also use a program called LinguaFolio. LinguaFolio is a self-assessment, self-report tool used in Europe and several U.S. states and designed for language learners. This tool helps your child track his/her progress while learning the language. Your child's program may also use other assessment tools.

We will do our best to keep your child's personal information confidential. All information collected by the survey will be stored in a password-protected database. We will not include participant names in any published reports, media, or public discussions of STARTALK. Your child's name will be given a code for survey data. This code, instead of a name, will link your child's survey and identity. Only the researcher, you, and your child will be able to see this information. We will ask for your permission if we want to cite your child by name for any reason.

Your child may be photographed or video or audio recorded for recruitment and teacher training purposes.

Sincerely,

A handwritten signature in black ink that reads "Betsy Hart".

Betsy Hart

Project Principal Investigator

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Parent Consent Form for Minors

Initials _____ Date _____

Project Title: STARTALK

Purpose of the Study (Why do I need to sign this form?) This research is being conducted by Betsy Hart at the University of Maryland, College Park. We are inviting you to participate in this research project because your child is participating in a STARTALK Program. The purpose of this research project is to collect data about your child’s experience and language learning in order to make further STARTALK programs better.

Procedures (What does my child have to do?) If your child is in K-5th grade, you, the parent or guardian, will be asked to complete a survey about your child and his/her STARTALK learning experience.

If your child is in 6th-12th grade, he/she will be asked to complete a survey on his/her STARTALK learning experience.

The survey will collect information about your child, including:

- demographic information
- your child’s experience learning the language
- how your child feels about the program

The survey is online and takes 15 minutes to complete.

During the research project, your child may also use LinguaFolio. LinguaFolio is a self-assessment, self-report tool used in Europe and several U.S. states by language learners.

<p>Your child may be photographed, video or audio taped during STARTALK program for recruitment and teacher training purposes.</p>	<p>Please select one of the statements below: <input type="checkbox"/> I give my consent to have my child photographed and video recorded for this study <input type="checkbox"/> I do not give my consent to have my child photographed and video recorded for this study</p>
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Potential Risks and Discomforts

There are no known risks for participation in this study.

Potential Benefits

There are no direct benefits from participation in this research. We hope that, in the future, other people might benefit from this study through improved understanding of what contributes to successful language teaching and learning.

Confidentiality

Any potential loss of confidentiality will be minimized by storing data in a password-protected database. Only National Foreign Language Center research staff will have access to see the survey and other data. Videos/photos are held by the program and are only requested by National Foreign Language Center staff if needed for promotional or educational purposes.

If we write a report or article about this research project, your child’s identity will be protected to the maximum extent possible. Your child’s information may be shared with representatives of the University of Maryland, College Park or governmental authorities if your child or someone else is in danger or if we are required to do so by law.

Right to Withdraw and Questions

Your child’s participation in this research is completely voluntary. Your child may choose not to take part at all. If



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he/she decides to participate in this research, he/she may stop participating at any time. If he/she decides not to participate in this study or if he/she stops participating at any time, it will not prevent him/her from any services that STARTALK provides, now or in the future.

If you decide to stop taking part in the study, if you have questions, concerns, or complaints, or if you need to report an injury related to the research, please contact the investigator:	Betsy Hart National Foreign Language Center The University of Maryland Mail Services Bldg #343 P.O. Box 93 College Park, MD 20742 bhart@nflc.umd.edu
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Participant Rights

If you have questions about your rights as a research participant or wish to report a research-related injury, please contact:	University of Maryland College Park Institutional Review Board Office 1204 Marie Mount Hall College Park, Maryland, 20742 E-mail: irb@umd.edu Telephone: 301-405-0678
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This research has been reviewed according to the University of Maryland, College Park IRB procedures for research involving human subjects.

Statement of Consent

By entering your name below you indicate that you are at least 18 years of age, you have read this consent form or have had it read to you, your questions have been answered to your satisfaction, and you voluntarily agree that your child may participate in this research study. If you have any questions regarding the consent form, please contact STARTALK at startalk@nflc.umd.edu.

If you agree that your child may participate, please complete the section below.

STARTALK Program Name: _____

Child's Name: _____

Parent or Guardian Name: _____

Program Location (City/Town): _____

State: _____