

NC STATE UNIVERSITY

Assent Form for 11 to 13 years old

Title of Study: STEM Career Clubs: Enhancing the potential of underrepresented students in STEM through a Strategic Teaming Model (eIRB # 4093)

Principal Investigator(s): Dr. Margaret R. Blanchard, Meg_Blanchard@ncsu.edu, 919-515-1771

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I am inviting you to participate in a research study about STEM careers, or careers in science, technology, engineering, and mathematics.

Your parent(s)/guardian(s) know I am talking with you about the study. This form will tell you about the study to help you decide whether or not you want to take part in the study.

What will I do?

If you decide to be in the study, you will be invited to participate in after-school STEM Career Clubs. You also will have the opportunity to participate in STEM career exploration activities and attend a school day college field trip. For all of these activities, you will be asked to respond to some short surveys about your experiences.

What benefits do I get for participating in this study?

Taking part in this study does not have direct benefits to you, but it will help me improving the STEM Career Clubs and will help the researchers better understand how to help students in preparing them for STEM jobs and college.

Can anything bad happen if I am in this study?

I do not expect anything bad to happen to you but some students may feel a little strange taking the survey or the assessments, but that is likely to lessen given that you will be taking the survey at home with your family or at school with a trusted teacher.

Will anyone know what I said or did in this study?

If you decide to be in the study, I will not tell anyone else how you respond or act as part of the study. No one besides the research team will know it's you. Even if your parents or teachers ask what you said or did, I will not tell them.

Everything that you share will remain private unless I think you are being hurt by someone else or in danger. In those rare and unusual circumstances, I am required to tell someone only enough information in order to help you be safe.

Will you share what you learn about/from me with other people?

I will not share information that I learn from you with others individuals outside the research group in ways that could identify you.

Do I have to be in the study?

No, you do not. The choice is yours. No one will get angry or upset if you do not want to do this. You will not lose or miss out on anything. You can also change your mind anytime if you decide you do not want to be in the study anymore.

What if I have questions?

If you have questions about the study, you can ask the principal investigator, Dr. Blanchard, at Meg_Blanchard@ncsu.edu or 919-515-1771.

If you have any questions about your rights as a participant in this research or if you feel you have been hurt because of this research, contact Jennie Ofstein at the IRB office at irb-director@ncsu.edu or (919) 515-8754. She will be able to help you.

You can download a copy of this form for you to keep.

Printing/typing your name below means that you have read this form or have had it read to you and that you want to be in this study. As a reminder, you can stop being in the study even after you say “yes.”

☐

Yes, I want to be in this study

Name _____

Today's Date _____

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No, I do not want to be in this study.

Thank you.