

EVALUATION Year 2

Parent/Guardian Permission Information Sheet for Participants Under 18 Years Old

This form is for families with youth under the age of 18 who are in Project Rise. Researchers are conducting an evaluation of the Project Rise program. This document tells you about the study. At the end, it asks permission for your child to be in the research study.

What is the evaluation of Project Rise?

Your child is enrolled in the Project Rise program. This evaluation will help us learn how Project Rise may help youth improve their relationships and sexual health. WestEd is a research organization and will be leading the research study. The study is funded by the U.S. Department of Health and Human Services: Administration for Children and Families (ACF).

What will my child do for the study?

Youth participation includes:

- Taking a 15-minute survey that asks about relationships and sexual health behaviors.
- Taking the same 15-minute survey at the end of the program.
- Possibly being asked to be in a 1-hour discussion group about their experience with the program.
- Taking a 5-minute survey asking about their experience with the program a few months after completing the program.

The surveys will be available in English and Spanish. These are written at a 7th grade level.

Are there any benefits or risks for participating in the study?

We do not anticipate any risks to you or your child for participating in this study other than those encountered in day-to-day life. There are no direct benefits to your child for participating in the study. What we learn may help with research on the relationships and sexual health of youth like your child.

Will my child's information be private?

Yes. All information shared through surveys will remain private. While we cannot guarantee confidentiality from participating in the discussion groups, we will go over ground rules with the youth about privacy and discretion. When reports are written about this research, no youth will be identified. Responses will be presented as the average responses of all youth.

Is participation voluntary?

Yes, participation in the study is voluntary. It's OK if you say no. Nobody will be mad if your child doesn't participate. Your child can still participate in the program even if they don't want to be in the study. Also, they can decide to stop participating in the study at any time.

Is there compensation for participation in the study?

Yes, your child will receive a \$25 gift card if they participate in a discussion group. They will also receive a \$10 gift card if they complete the 3–4-month follow-up survey.

What if I have questions?

If you have any questions about this research study, you can contact Jonathan Nakamoto from WestEd at jnakamo@wested.org or (562) 799-5498. If you have any questions or concerns regarding your or your child's rights as a participant in this study, you may contact WestEd's Institutional Review Board (IRB) at subjects@wested.org or 844-IRB-KIDS (844-472-5437).

Parent/Guardian Consent for Participants Under 18 Years Old

Complete this section below to indicate if you do or do not give permission. Reminder: Participation in this research study is voluntary. You and your child can withdraw at any time.

☐ **Yes**, I would like for my child to be in the Project Rise study.

☐ **No**, I would not like my child to be in the Project Rise study.

Child's Name (printed)

Parent/Guardian Name (printed)

Parent/Guardian Signature

Date

Year 2 Participant Application

TELACU/FuturoNow Project Rise

FOR USE BY FUTURONOW PERSONNEL ONLY: _____

1. PARTICIPANT INFORMATION (Please Type or Print Clearly)

PARTICIPANT NAME: (First, Middle Initial, Last)		DATE OF BIRTH:
ADDRESS: (Number, Street, and Apt or Suite No.)		AGE:
ADDRESS: (City, State, Zip)		CIRCLE ONE: MALE FEMALE

ETHNICITY:	YOUTH CELL PHONE: () -	YOUTH E-MAIL:
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Does your child have any physical limitations we should know about? YES NO Brief Description:

Does your child have any food allergies we should know about? YES NO Brief Description:

2. PARENT/GUARDIAN INFORMATION (we will use this contact in case of emergency)

A. PARENT/GUARDIAN NAME: (First, Middle Initial, Last)		RELATIONSHIP TO YOUTH
PARENT/GUARDIAN CELL PHONE () -	PARENT/GUARDIAN E-MAIL:	

3. PARENT'S CONSENT and YOUTH ASSENT

Enter participants name below

[Redacted Name] is invited to participate in the TELACU/FuturoNow Project Rise Teen Intervention Project where he/she will learn relationship skills, that will help him/her with youth development in but not limited to life skills, healthy relationships, dating violence, sexual delay and sexual risk avoidance. This program consists of 8 hours. During that time your youth will be invited to complete questionnaires before and after the program. The questionnaires ask about healthy relationships and what the youth will be learning in the program. Participation in the program and completing the questionnaires is completely voluntary, which means that there are no consequences if your youth does not want to join the program. We will keep the information we collect confidential. We will not use any names on oral or written reports or presentations. This form is the only one that has your information and we will keep it in a locked cabinet, within a locked office in the main offices of TELACU. Nobody except the program manager and project analyst will have access to this form.

If you agree to let your youth participate, please read this statement and sign below.

My signature here means that I give my consent to allow my child/ward to participate in the TELACU/FuturoNow Project Rise Teen Intervention Project in order to learn healthy relationship skills:

_____ Parent/Guardian Signature	_____ Date
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PHOTO RELEASE

Sometimes program staff take photos, recordings or films of participants during the program. These photos may be used for program advertisement and/or in presentations or reports. If you agree to have the photo of your youth taken during the program review the statement below and sign.

My signature here means that I authorize TELACU to take a photo, video, or recording of my youth during the program and to use the photo for program marketing purposes, or during presentations or reports.

_____ Parent/Guardian Signature	_____ Date
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YOUTH ASSENT

I understand what the TELACU/FuturoNow Project Rise Teen Intervention Project program is about and what to expect if I join in. I also understand that my participation is voluntary and that the program staff will keep my participation confidential. I was given the opportunity to ask any questions about the program. My signature below means that I agree to participate.

_____ Participant (Youth) Sign or Type in Full Name	_____ Date
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Will my information be private?

Yes. All information shared through surveys will remain private. If you participate in a discussion group, other youth will be in the discussion group and will hear your answers. While we cannot guarantee confidentiality from participating in the discussion groups, we will go over ground rules with the youth about privacy and discretion. When reports are written about this research, no youth will be identified. Responses will be presented as the average responses of all youth. If you write something on the survey or say something in the discussion group that makes WestEd think you may have been abused or are a danger to yourself or others, we will need to let the proper authorities know.

Is participation voluntary?

Yes, participation in the study is voluntary. It's OK if you say no. Nobody will be mad if you don't participate. You can still participate in the program even if you don't want to be in the study. Also, you can decide to stop participating in the study at any time.

Is there compensation for participation in the study?

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Youth Consent/Assent

Complete this section below to indicate if you do or do not want to be in the study. Reminder:
Participation in this research study is voluntary. You can withdraw at any time.

☐ **Yes**, I would like to be in the Project Rise study.

☐ **No**, I would not like to be in the Project Rise study.

Name (printed)

Signature

Date