Sample Adult Participant Consent Form

Dear Participant:

My name is Ann Doe and I am completing research as a degree requirement at Piedmont College. I am asking you to complete a survey being given to individuals who teach in your school district. The purpose of this survey is to gain insight into individual’s perceptions of self-efficacy related to curricular decisions. The survey will ask questions about the implementation of common core standards and your role in implementing them. It is our hope that information from this survey will contribute to a better understanding of teacher self-efficacy regarding curricular implementation.

Your responses to the survey will be anonymous. Your name will not be collected or appear anywhere on the survey and complete privacy will be guaranteed.

Participation is completely voluntary and you may withdraw at any time. There is neither a reward for participating, nor a consequence for not participating.

For further information regarding this research please contact me at 706 778 8500, ade@piedmont.edu, or my supervising professor, Dr. Senor Doe at sdoe@piedmont.edu.

If you have any questions about your rights as a research participant you may contact Ron Leslie, Piedmont College IRB Chair at 706 778 8500 Ext 1300 (rleslie@piedmont.edu).

There are two copies of this letter. After signing them, keep one copy for your records and return the other one. Thank you in advance for your cooperation and support.

Please indicate your agreement to participate by signing below.

I am 18 years or older and have read and understood this consent form and agree to participate.

Signature: ____________________________________________

Name: ____________________________________________ (Please Print)

Date: _____________________________________________