LEARNING BY PLAYING: THE EFFECT OF PLAYING ON CHILDREN’S LEARNING OUTCOMES

Example Format for an Assent Document ~ 3rd Grade Reading Level
Assent to be in a Research Study - (for Children 7-13 yrs of age)

Who are we?
My name is Yishin (Vivian) Wu and I am a doctoral candidate at the University of Buffalo (or other location). I work in the Department of Communication.

Why are we meeting with you?
We want to tell you about a study that involves children like yourself. We want to see if you would like to be in this study too.

Why are we doing this study?
We want to know if playing can help children like you to learn better.

What will happen to you if you are in the study?
You will join us and other children in a 5-day winter camp (from December 26th to 30th). During this 5 days, you will try out different ways of playing, like board games, arts and crafts, sports, and video games.

What are the good things and bad things that may happen to you if you are in the study?
You will be able to play many games with other children. There are no bad thing that may happen to you besides some scenes with people getting mad at each others or pushing other people from one of the video games we will try out.

Do you have to be in the study?
No you don’t. No one will get angry or upset with you if you don’t want to do this. Just tell us if you don’t want to be in the study. And remember, you can change your mind later if you decide you don’t want to be in the study anymore.

Do you have any questions?
You can ask questions at any time. You can ask now. You can ask later. You can talk to me or you can talk to someone else at any time during the study. You can call:

Name of contact person on the study: Yishin (Vivian) Wu
Phone Number: 716-208-5535

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Signature Block for Assent of Child

Your signature documents your permission to take part in this research.

Signature of subject ___________________________ Date ___________________________

Printed name of subject ___________________________

I certify that the nature and purpose, the potential benefits and possible risks associated with participation in this research study have been explained to the above individual and that any questions about this information have been answered. A copy of this document will be given to the subject.

Signature of person obtaining consent ___________________________ Date ___________________________

Printed name of person obtaining consent ___________________________

[When the IRB Requires- add the following block if a witness will observe the assent process. e.g., short form of consent documentation or illiterate subjects.]

My signature below documents that the information in the consent document and any other written information was accurately explained to, and apparently understood by, the subject, and that assent was freely given by the subject.

Signature of witness to assent process ___________________________ Date ___________________________

Printed name of person witnessing assent process ___________________________