SAMPLE COVER LETTER FOR PARENTAL CONSENT

Title: Special Education Students' Attitude/School Performance

Project Chair: Dr. Certo Committee Member: Dr. Schuler

Department of Special Education College of Education San Francisco State University 1600 Holloway Avenue San Francisco, CA 94132

 Student Researcher Name
 Phone: 999-999-999

 Dr. Certo
 Phone: 415-338-9999

 Dr. Schuler
 Phone: 415-338-9999

Child's Name:	Date:	

Dear Parents/Guardians:

I am a graduate student at San Francisco State University conducting a study in your child's Special Day Class to investigate if students' attitudes about being placed in Special Day Class affects school performance.

The students will participate in answering an attitude rating scale. The questionnaire will be given only once at the beginning of the quarter, during the first week in October 2002. There will be a follow-up interview for students to reflect or comment on their choices, during the second week of October 2002. This will be audio taped. Participation in this study should take about 1 ½ hours over a two-week period. It will be conducted during school hours. Participation in the rating scale and interview is voluntary. Make up work will be available if necessary. Make up work will be done during classroom free time period, which is conducted weekly. If the student prefers, they can come before school, during lunch or after school for make up work in Mr. Teacher's classroom. The teacher, Mr. Teacher will provide the makeup work. Students also have the option to take make up work home. There will be no penalty due to refusal to participate at any time. All information collected from students will be identified by number only. When publishing the results, the information will be anonymous and will be disguised so that no personal identification can be made. THE RESULTS OF THIS STUDY WILL IN NO WAY HAVE ANY EFFECT ON THE STUDENT'S GRADE IN ANY CLASSES.

If you have any questions about the questionnaire or your child's rights, please feel free to contact me at school, 999-999-9999 or Dr. Certo, chair of the committee at 415-338-9999.

If your child has consent to participate in the research project, please fill out the attached consent form and return it to me as soon as possible.

Sincerely,

Student Researcher Name

Special Day Class Teacher/Jefferson High School