Memory and Cognition Laboratory/Human Leaning and Memory Laboratory (CMC)



Research Participant Consent Form

Research Director: Allison Lewin E-mail: Alewin10@cmc.edu Phone: (240) 401-6215

Faculty Sponsor: Professor Gabriel Cook Email: gcook@cmc.edu Phone: (909) 607-0493

Research Organization: Claremont McKenna College- Department of Psychology Title of Research Project: "Investigating Working Memory and Source Memory for Verbal Information Belonging to Different Categories"

DESCRIPTION OF RESEARCH PROCEDURES

The present study examines working memory and source memory within working memory. You will be asked to complete a cognitive recall task for which you will sit at a computer, and give your full attention to 18 word sequences. Each word in the sequence will appear on the center of the computer screen in one of two different colors. After each trial, you will be asked to write down as many words from the sequence as you can, and indicate the color of each word. After the cognitive recall task, you will be asked to complete two surveys. By participating in this study, you are helping to further explore working memory, and source memory. Source memory is a topic within cognitive psychology that is relatively new, and important in enabling psychologists to better understand how memories form and what they include. The study should take about 45 minutes. There are no known risks in participating in this study.

STATEMENT OF CONSENT AND AGREEMENT

- 1. I am at least 18 years old.
- 2. I am freely choosing to participate without pressure or coercion.
- 3. The nature and purpose of this research and the possible benefits and risks have been explained to me by the experimenter.
- 4. There are no foreseeable risks in participating in this study.
- 5. I understand that I may refuse to participate, skip any questions, or withdraw my consent at any point and without penalty or prejudice.
- 6. I will be asked some demographic information and some other personal information at the end of the experiment.
- 7. I will receive 1 research credit for my participation if I am in the participant pool.
- 8. If I am not in the participant pool. I will be entered into a raffle to win a gift certificate for \$40 to Aruffo's. an Italian restaurant in the Claremont village. If I withdraw at any time from the experiment, I will still be entered into the raffle as stated above.
- 9. I understand that any information I provide and scores I receive will be anonymous and confidential.
- 10. If I am not satisfied with my participation, I will inform the research director listed at the top of this form. I may also inform Michael O'Neill (moneill@cmc.edu, 909-607-8336) who is the chair of Claremont McKenna College's Institutional Review Board, an independent advisory group interested in the opinions and welfare of research participants.
- 11. I have had, and will continue to have the opportunity to ask guestions and voice concerns to the experimenter present.

By signing below, I am indicating that I have read and understood all of the above and consent to participate in this experiment.

Name of research participant: ______(Please print)

Signature of research participant: _____ Date: _____