

Dear Parents,

Your son or daughter has enrolled in an Introductory Psychology course this term at the University of Michigan. As part of the requirements for this course, students can opt to (1) participate in the Psychology Department's Introductory Psychology Subject Pool, wherein they will participate in 6 hours of psychology research studies or (2) complete alternative written assignments where students are asked to summarize the goals and findings of a research article from one of many psychology research journals.

Your child has elected to participate in the Introductory Psychology Subject Pool. Because your son or daughter is currently under the age of 18, federal law requires that we receive parental consent before your child can participate in any type of research. The Introductory Psychology Subject Pool was developed on the premise that students taking psychology courses should learn first-hand about psychological research and how it is conducted. It is our belief that the best way to do so is to be a participant in such research. Topics that are studied in the subject pool include research on memory, perception of objects, reading, decision-making, emotions and stereotypes.

The studies affiliated with the subject pool are designed and conducted by psychology faculty, graduate students and senior honors students and data collected from these studies may be used for research journal articles, doctoral dissertations and senior honor theses. Every study affiliated with the subject pool has been reviewed and approved by the University of Michigan's Behavioral Sciences Institutional Review Board to assure compliance with the use of human subjects in research. Prior to participating in any of the studies, your child will also be given an informed assent statement and afterward, would receive written feedback about the study that they are free to share with you. Researchers will keep any identifying information about participants confidential. Participants are free to terminate their participation in any given study at any time. To participate in the subject pool, introductory psychology students complete an enrollment questionnaire on the first day of classes asking for identifying information that will eventually be used to create an individual sign-up account on the department's web page. This account then allows each student to view those studies currently included in the psychology's subject pool. Students are free to pick and choose in which of these studies they would like to participate. The choice is completely up to them and there is no required participation in any specific study. We have provided a detailed description listing the student guidelines for participating in the Introductory Psychology Subject Pool with this letter. In order to allow your child to participate in the subject pool, we require your signature on the enclosed consent form. Please read through the consent form thoroughly. You may keep or make a copy of this letter for your records. If you wish additional information, please feel free to call (734)764-2580 or email subject.pool@umich.edu and our staff in the Psychology Student Academic Affairs Office will be happy to assist you.

If you would like more information about the rights of your child as a participant in research studies and the approval of studies included in the psychology subject pool in general, please contact the Institutional Review Board Health Sciences-Behavioral Sciences, 540 East Liberty Suite 202 Ann Arbor, MI 48104 (734) 936-0933 or irbhsbs@umich.edu.

Sincerely,

Colleen Seifert, Ph.D.
Associate Chair, Department of Psychology Student Academic Affairs

INFORMED ASSENT

Contact Information: Introductory Psychology Subject Pool, University of Michigan, Department of Psychology Student Academic Affairs Office. 1343 East Hall, 530 Church Street, Ann Arbor, MI 48109-1043. Office phone: (734) 764-2580 or Fax: (734) 615-7584 Email: subject.pool@umich.edu

Institutional Review Board Health Sciences-Behavioral Sciences, 540 East Liberty Suite 202 Ann Arbor, MI 48104 (734) 936-0933 or irbhsbs@umich.edu

I, _____, hereby willingly agree to participate in the Introductory Psychology Subject Pool for course credit and understand that this requires participation in 6 hours of psychological research. I understand that there is an alternative written assignment available to satisfy the course requirement, but I have freely chosen to participate in the subject pool. I understand that I am expected to abide by all rules and regulations pertaining to participation in the Introductory Psychology Subject Pool and I have been provided with a copy of these rules and regulations. I also understand that any violation of these rules and regulations entitles the Department of Psychology to terminate my participation in the subject pool and as a result, I will be expected to complete the alternative assignment instead. I understand that I am free to choose which psychological studies I would like to complete for course credit and that I am not required to participate in any single study to satisfy the course requirement. Further, I understand that I am free to refuse to answer specific questions or participate in certain parts of the research studies so described. I also understand that any information collected from me will remain confidential except as may be required by federal, state or local law.

Date

Student's Signature

Please print your name here

Please complete the following information, which is needed for our records in the Psychology Student Academic Affairs Office to ensure that you receive credit for your participation.

Unique name: _____

Term of Participation (circle one): Fall Winter Spring Summer Year: _____

Student UM ID number: _____

Course Number (circle one): 111 112 114 115

Instructor: _____

INFORMED CONSENT FORM

Contact Information: Introductory Psychology Subject Pool, University of Michigan, Department of Psychology Student Academic Affairs Office. 1343 East Hall, 530 Church St, Ann Arbor, MI 48109-1043. Office Phone: (734) 764-2580 or Fax: (734) 615-7584 Email: subject.pool@umich.edu

Institutional Review Board Health Sciences-Behavioral Sciences, 540 East Liberty Suite 202 Ann Arbor, MI 48104 (734) 936-0933 or irbhsbs@umich.edu

This is to certify that we, the parents of _____, hereby agree to allow our child to participate in the Introductory Psychology Subject Pool at the University of Michigan. We understand that guidelines established by the US Department of Health and Human Services require parental consent for children and adolescents under the age of 18 to participate in psychological research. We also understand that all research projects affiliated with the Department of Psychology's Subject Pool have been approved by the Behavioral Sciences Institutional Review Board at the University of Michigan. As a participant of the subject pool, we understand that our child will be involved in psychological research conducted by faculty, graduate students, and senior honors students in the Department of Psychology and that our child will be expected to abide by the rules and regulations for subject pool participation. We understand that violation of these rules and regulations entitles the Department of Psychology to terminate my child's participation in the subject pool, requiring them to complete the alternative written assignment instead. A detailed description of what these rules and regulations has been provided. We understand that our child will be expected to participate in 6 hours of psychological research as part of the course requirements and that they have freely elected this option over the alternative written assignment. We also understand that our child is free to choose in which studies they would like to participate and that they are not required to participate in any single study for course credit. We further understand that our child is free to refuse to answer any questions or participate in any part of the research studies so described. Further, we understand that all information collected from our child will remain confidential except as may be required by federal, state, or local law.

Date

Parent/Guardian Signature

Please print your name here

Mailing Address: _____

Email Address: _____

Phone Number: _____