



Cleveland State University

Parental or Guardian Consent Form

Dear Parent or Guardian:

My name is Dr. Debbie Jackson. I am a professor at Cleveland State University (CSU) in the teacher education department. I will be leading the study described below. We are requesting your child's participation in our study. If you have any questions, please feel free to contact me at (216) 687-5420.

Other CSU faculty researchers in this study are Dr. Nigamanth Sridhar, associate professor in the electrical engineering and computer science department, and associate professors Dr. Brian Harper and Dr. Karla Hamlen Mansour in the curriculum and foundations department.

The study aims to assess the computer science program. We would like to evaluate the course itself and the training your child's teacher received at Cleveland State University.

Your child will be asked to complete an online survey at the beginning and at the end of the school year. The survey will take about 20 minutes to complete.

Your child's class will also be observed while their teacher is teaching. The observers will be from CSU.

Your child's name will not be attached to any surveys or assessments, and we will not include your child's name in any way. Your child's teacher may receive general feedback, but your child's teacher will never see your child's individual answers.

Your child may skip any items. Your child may withdraw from this study at any time without any consequence.

Only summary results will be used. No personal identifiers will be included in the data.

Please read the following: ***"I understand that if I have any questions about my child's rights as a research subject, I can contact the Cleveland State University Institutional Review Board at (216) 687-3630."***

There are two copies of this form. After signing them, keep one copy for your records. Please return the other copy to your child's school. Thank you in advance for your support.

If you agree to allow your child to participate, please sign below.

Parent's Signature: _____

Child's Name: _____ (Please Print)

Date: _____