

THE UNIVERSITY OF NORTH CAROLINA
GREENSBORO

OMB Number: xxxx-xxxx
Expiration Date: xx/xx/08

(Return one signed copy and keep the second for your records)

PROJECT TITLE: The Effectiveness of a Program to Accelerate Vocabulary Development in Kindergarten

TEACHER'S NAME: _____ School: _____

The Regional Education Laboratory—Southeast, a research organization at the SERVE Center at the University of North Carolina at Greensboro, is working with the Mississippi Department of Education to learn more about what kinds of instruction are most effective for helping students develop the vocabulary skills necessary for becoming successful readers. As part of this study, which is funded by the U.S. Department of Education, teachers will receive training in how to use research-based classroom practices designed for kindergarten children, and researchers will conduct observations in the participating classrooms. In addition, we will be asking some teachers to participate in discussions of their experiences using the classroom practices.

DESCRIPTION AND EXPLANATION OF PROCEDURES:

Teachers in half of the participating schools will receive the training on one day during the upcoming summer, with some in-classroom support during the early weeks of the school year. Teachers in the other half of the participating schools will receive the training on one day during the following summer. Teachers and other school personnel will NOT be able to request which year the training is provided.

For this study, researchers will observe your classroom once during the fall and once during the spring of the upcoming school year, and may observe your classroom once during the fall of the next school year. The observations will last throughout the morning and will take place during the upcoming school year, regardless of whether you have already received the training. At the same time that classrooms observations are being conducted, we will also audiotape record your literacy lesson for 20 minutes. In addition, you will be asked to complete a brief (10 minute) survey about your education and prior training. Some teachers will also be interviewed during the following school year about their experiences using the research-based classroom practices.

POTENTIAL BENEFITS:

By participating in this study you will likely improve your knowledge of and ability to carry out a set of specific vocabulary enhancement strategies in the classroom. These strategies are linked to improved literacy skills in young children. Moreover, you will be assisting the Mississippi Department of Education with its efforts to enhance children's reading skills and to improve literacy instruction, especially in schools with a number of children from low-income households.

POTENTIAL RISKS AND DISCOMFORTS:

Participating in this study poses minimal to no risk either to you or to your school. The only potential discomfort is that typically experienced by some teachers when being observed or recorded, even with a trained observer who is as unobtrusive as possible. Your participation is voluntary, and you may decline to participate by simply not returning this form. If you agree to participate now, you may decline to participate at any time during the study. Choosing not to participate will not affect your relationship with your school, the Mississippi Department of Education, nor the persons conducting this research.

CONFIDENTIALITY:

To ensure privacy, identification numbers will be used on the forms rather than names. All of the information that is collected will be stored separately from school records in a confidential, secure location and will be destroyed after four years. Written records will be shredded and electronic files purged. Information gathered in this study will be used only for statistical purposes. The reports prepared for this study will summarize findings across the sample and will not associate responses with a specific district, school or individual. We will not provide information that identifies you, your school, or your district to anyone outside the study team, except as required by law.

CONSENT:

Regional Educational Laboratory

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APPROVED IRB

5/29/07

Ann C. H. F. John

CONSENT FORM

By signing this consent form, you agree that you understand the procedures and any risks and benefits involved in this research. You are free to refuse to participate or to withdraw your consent to participate in this research at any time without penalty or prejudice; your participation is entirely voluntary.

The research and this form have been approved by the University of North Carolina at Greensboro Institutional Review Board, which ensures that research involving people follows federal regulations. Questions regarding your rights as a participant in this project can be answered by calling or e-mailing Eric Allen, Office of Research Compliance at the University of North Carolina at Greensboro (336) 256-1482 or eric_allen@uncg.edu. Questions regarding the research itself will be answered by calling Dr. Joan McLaughlin at (800) xxx-xxxx. By signing this form, you are agreeing to participate in the project. **Please sign and return one copy of this form and keep the other for your records.**

Participant's Signature _____

Date _____

APPROVED IRB
5/29/07
David P. Hatcher

CONSENT FORM
SOUTHEAST