Student ID:	
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## NEXT Generation Health Study Student Assent Form

My parent or guardian has said I can be in the project called *The Next Generation Health Study (NEXT)*. I understand that this project will ask me about my eating, physical activity, driving, and alcohol, tobacco, and drug use, as well as my relationships with my family and friends. I also understand that if I agree to take part in the study, some people from The CDM Group will ask me to complete some activities during my  $10^{th}$  grade year, the spring semesters of my  $11^{th}$  and  $12^{th}$  grade years, and in the spring of the year after I leave high school. These activities are

- 1. Filling out a 45-50 minute survey at school in 10<sup>th</sup> grade and on-line or by phone in 11<sup>th</sup> and 12<sup>th</sup> grades, and the year after I leave high school
- 2. Having my height, weight, and waist measured at my school during 10<sup>th</sup>, 11<sup>th</sup>, and 12<sup>th</sup> grades.
- 3. Providing a sample of my saliva.

Being involved in the study is up to me. I can choose to quit or ask to stop at any time. Also, if I do not like any of the questions, I do not have to answer them. No one will be upset if I don't want to be in the project. If I decide not to be in this project, it will not affect my schoolwork, grades, or what my teachers think of me.

I understand that I will receive a gift card for \$10.00 for completing the survey this year. If I agree to have my height, weight, and waist measured, too, I will receive another gift card worth \$25. If I agree to give a sample of my saliva, I will receive another gift card for \$20. If I do all three activities I will receive gift cards for a total of \$55. I also understand that I will receive a gift card each time I complete an activity for this study in 11<sup>th</sup> and 12<sup>th</sup> grades and the year after I leave high school.

- 1. In 11<sup>th</sup> grade I will receive gift cards for \$25 for completing the survey and \$25 for having my height, weight, and waist measured.
- 2. In 12<sup>th</sup> grade I will receive gift cards for \$30 for completing the survey and \$25 for having my height, weight, and waist measured.
- 3. In the year after high school, I will receive a gift card for \$40 for completing the survey. My height, weight, and waist will not be measured that year.

Finally, I understand that before I turn 18 if my height or body weight is way below that of other boys or girls my age, my parent or guardian will receive a letter telling them that. Only the people working on this project will see the rest of my information.

Please r	mark	one o	of the	choices	below	to t	ell us	s wha	t you	want	to	do:

	Yes, I	want to	be in	this	project but	ONLY	complete the	survey	(sign	below)	
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measurements (sign below)  Yes, I want to be in this project	t and complete <b>ALL</b> of the activities including nts, and the saliva sample(sign below).
By signing my name below, I agre <i>Study</i> .	e to be involved in the NEXT Generation Health
Child's Signature	Date
Please PRINT your first and las	st name below:
PRINTED NAME:First Name	 Last Name