

Kathy Sonnenfeld
Survey Director

P.O. Box 2393
Princeton, NJ 08543-2393
Telephone (609) 799-3535
Fax (609) 799-0005
www.mathematica-mpr.com
(609) 275-2293

[DATE]

Dear Parent or Guardian:

Your child's school and school district are participating in a national study on the training and certification of middle and high school math teachers. The **Study of Secondary Math Teachers from Alternative Routes to Certification** is sponsored by the U.S. Department of Education. Your school and school district have given Mathematica Policy Research, Inc. (MPR) permission to conduct the study. MPR has conducted research that helps to improve the quality of our nation's schools for decades.

We are writing to tell you about the study and to invite your child to be part of the study. While your child will not receive any direct benefit from participating in this study, the study will help your district and school improve the quality of their teachers. Participating in the study poses no risk to your child.

As part of the study, **we will collect information from school records** on your child's state or district math test scores, sex, age, grade level, race, ethnicity, eligibility for free or reduced-price lunch, English language learner status, and special education status. We will not collect school grades.

This study will **help us learn more about how well teachers do their jobs**. Participation in the study is voluntary, and your child can stop participating at any time. If you do not want your child to take part in the study it will not affect the instruction or other services your child receives at school.

The confidentiality of students, teachers, and schools participating in the study will be protected. Only the researchers conducting the study will have access to the data that are collected as part of the study. District officials, principals, teachers, and other school staff will not have access to the study data. The data for all schools and classes in the study from this district will be combined when presented.

Again, there are no potential risks to your child. However, if you **do not want** your child's anonymous school records included in the study, please call me, Kathy Sonnenfeld, at Mathematica Policy Research, Inc., (609) 275-2293, or toll-free at (866) 330-9199. I'll need to know your child's name, his or her math teacher's name, the name of the school, and the school's location (city and state). Otherwise, you need not do anything.

Please feel free to contact me with any questions or concerns. Thank you in advance for your help with this important study.

Sincerely,

PASSIVE CONSENT FOR GRADES 9 – 12

PARENT NOTIFICATION LETTER

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Policy Research, Inc.

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Your child's class will be given a test of math skills during a regular school day in the spring of 2010. This test will have no effect on your child's grades, but it will **help us learn more about how well teachers do their jobs**. Participation in the study is voluntary, and your child can stop participating at any time. If you do not want your child to take part in the study it will not affect the instruction or other services your child receives at school.

As part of the study, **we will also collect information from school records** on your child's state math test scores, sex, age, grade level, race and ethnicity, eligibility for free or reduced price lunch, English language learner status, and special education status. We will not collect school grades.

The confidentiality of students, teachers, and schools participating in the study will be protected. Only the researchers conducting the study will have access to the data that are collected as part of the study. District officials, principals, teachers, and other school staff will not have access to the study data. The data for all schools and classes in the study from this district will be combined when presented.

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We need your help.

- Please **read** this letter and contact us if you have any questions.
- Please **read** and **sign** the attached consent form to let us know if your child may take part in the study.
- Please **return** the consent form in the enclosed envelope to your child's school/teacher as soon as possible.

*As a thank you, your **child** will receive a \$5 gift card for returning this signed form*

If you have any questions or concerns, please call me, Kathy Sonnenfeld, at Mathematica Policy Research, Inc., (609) 275-2293, or call our toll free number, (866) 330-9199.

Thank you in advance for your help with this important study.

Sincerely,

ACTIVE CONSENT FORM FOR GRADES 6 – 8**PLEASE READ THE FOLLOWING STATEMENTS ABOUT AN IMPORTANT STUDY**

Your child's school and school district are participating in a national study, the Study of Secondary Math Teachers from Alternative Routes to Certification, sponsored by the U.S. Department of Education. The study is about the training and certification of middle and high school math teachers. Your school district has given Mathematica Policy Research, Inc. permission to conduct this study. While your child will not receive any direct benefit from participating in this study, the study will help your district and school improve the quality of their teachers. Participating in the study poses no risk to your child.

As part of the study, **we will collect information from school records** on your child's state math test scores, sex, age, grade level, race and ethnicity, eligibility for free or reduced price lunch, English language learner status, and special education status. We will not collect school grades. This study will **help us learn more about how well teachers do their jobs.** Participation in the study is voluntary, and your child can stop participating in the study at any time. If you do not want your child to take part in the study it will not affect the instruction or other services your child receives at school.

The confidentiality of students, teachers, and schools participating in the study will be protected. Only the researchers conducting the study will have access to the data that are collected as part of the study. District officials, principals, teachers, and other school staff will not have access to the study data. The data for all schools and classes in the study from this district will be combined when presented.

PLEASE MARK ONE BOX BELOW**PLEASE MARK (X) ONLY ONE BOX**

- YES**, my child **CAN** participate in the Study of Secondary Math Teachers from Alternative Routes to Certification
- or
- NO**, my child **CANNOT** participate in the Study of Secondary Math Teachers from Alternative Routes to Certification

PLEASE PROVIDE THE FOLLOWING INFORMATION**PLEASE SIGN:**

Parent/Guardian Signature: _____ Date: _____
sign

PLEASE PRINT

Print Parent/Guardian Name: _____
print

Parent/Guardian Telephone Number: (_____) - _____ - _____

Student Name: [PRE-FILL STUDENT NAME]

School Name: [PRE-FILL SCHOOL NAME]

Teacher Name: [PRE-FILL TEACHER NAME]

Math Class: [PRE-FILL COURSE NAME/#]

**PLEASE RETURN THIS FORM TO YOUR CHILD'S TEACHER LISTED ABOVE AS SOON AS POSSIBLE
 THANK YOU**

**If you have questions about the study, please call
 Kathy Sonnenfeld, Survey Director at Mathematica Policy Research, Inc.
 at (609) 275-2293 or toll-free at (866) 330-9199.**

ACTIVE CONSENT FORM FOR GRADES 9 – 12**PLEASE READ THE FOLLOWING STATEMENTS ABOUT AN IMPORTANT STUDY**

Your child's school and school district are participating in a national study, the Study of Secondary Math Teachers from Alternative Routes to Certification, sponsored by the U.S. Department of Education. The study is about the training and certification of middle and high school math teachers. Your school district has given Mathematica Policy Research, Inc. permission to conduct this study. While your child will not receive any direct benefit from participating in this study, the study will help your district and school improve the quality of their teachers. Participating in the study poses no risk to your child.

Your child's class will be given a test of math skills during a regular school day in the spring of 2010. This test will have **no effect on your child's grades**, but it will **help us learn more about how well teachers do their jobs**. Participation in the study is voluntary, and your child can stop participating in the study at any time. If you do not want your child to take part in the study it will not affect the instruction or other services your child receives at school.

As part of the study, **we will also collect information from school records** on your child's state math test scores, sex, age, grade level, race and ethnicity, eligibility for free or reduced price lunch, English language learner status, and special education status. We will not collect school grades.

The confidentiality of students, teachers, and schools participating in the study will be protected. Only the researchers conducting the study will have access to the data that are collected as part of the study. District officials, principals, teachers, and other school staff will not have access to the study data. The data for all schools and classes in the study from this district will be combined when presented.

PLEASE MARK ONE BOX BELOW**PLEASE MARK (X) ONLY ONE BOX**

YES, my child **CAN** participate in the Study of Secondary Math Teachers from Alternative Routes to Certification

or

NO, my child **CANNOT** participate in the Study of Secondary Math Teachers from Alternative Routes to Certification

PLEASE PROVIDE THE FOLLOWING INFORMATION**PLEASE SIGN:**

Parent/Guardian Signature: _____ Date: _____
sign

PLEASE PRINT

Print Parent/Guardian Name: _____
print

Parent/Guardian Telephone Number: (_____) - _____ - _____

Student Name: [PRE-FILL STUDENT NAME]

School Name: [PRE-FILL SCHOOL NAME]

Teacher Name: [PRE-FILL TEACHER NAME]

Math Class: [PRE-FILL COURSE NAME/#]

**PLEASE RETURN THIS FORM TO YOUR CHILD'S TEACHER LISTED ABOVE AS SOON AS POSSIBLE.
THANK YOU.**

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