

Site: _____
Date: _____

OMB Control # 0584-0524
Expiration Date: 04/30/2013

Attachment C – Food Service Staff Letter

OMB BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0524. The time to complete this information collection is estimated as part of the 10 minutes for the screener, including the time for reviewing instructions and completing the information.

[DATE], 2012

Dear Staff member

My name is [Researcher's Name] and I work for the Michael Cohen Group, a research firm that specializes in children, education and media.

We are currently working with your school to develop effective ways to talk with children about nutrition. This effort is being sponsored by the United States Department of Agriculture. To this end, we are working with two teachers in your school to pilot nutritional lesson plans for grades 5 and 6 that will use both the school garden and the cafeteria.

Your participation will be to work with the students during the 10-week curriculum so that the students can apply their classroom learning the school cafeteria. Upon completion of the 10-week curriculum, we'll ask you and to participate in an in-depth phone interview about your experience with the curriculum and complete a brief survey.

For your participation in this study, you will receive \$20 as a token of our appreciation.

Included with this letter you will find a consent form with additional information. If you would like to participate, please complete the consent form and return them to your principal.

Thank you for your consideration and we look forward to working with you.

[Researcher's Name]

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Attachment C – Food Service Staff Informed Consent Form

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STUDY TITLE: Project JMH Gardening: Pilot Curriculum Research

PROTOCOL NUMBER: 229G

PRINCIPAL INVESTIGATOR: Michael Cohen, Ph.D.

TELEPHONE: 212-431-2252

ADDRESS: SoHo Research Centre
375 West Broadway, Suite 502
New York, NY 10012

BACKGROUND AND PURPOSE:

You are invited to participate in a research study conducted by Michael Cohen Group as part of a United States Department of Agriculture sponsored effort to develop a nutrition curriculum for 5th-6th grade children. Michael Cohen Group is an international research and consulting firm that specializes in children, education and media.

We are currently working to develop an effective and easily integrated 10-week nutrition curriculum for 5th-6th grade children, based on the MyPlate.gov suggestions for healthy eating that will be easily integrated into school meals and food choices. If you participate, you will be asked to support their learning by working with the students in the school cafeteria and discuss your experience with the curriculum.

PROCEDURES:

As part of this research project, you will meet with participating students to discuss school meals and nutrition, plan additional meals, and create informational posters about healthy school meal options. At the end of the program, you will also be asked to complete and brief survey and participate in an in-depth phone interview about your experience with the curriculum.

POSSIBLE RISKS AND BENEFITS:

We do not anticipate any risks associated with being in this study. We do not promise that you will receive any benefits from this study. However, we do anticipate that most people will enjoy participating in the research process.

STIPEND:

At the end of the research activities, you will receive \$20 as a token of our appreciation.

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PARTICIPANTS' RIGHTS:

Participation in this study is voluntary. We will not work with you unless you give your consent. You have the right to change your mind and withdraw your consent or discontinue participation at any time without any penalty or loss of the benefits to which you are otherwise entitled. You have the right to refuse to answer particular questions. Your comments will be kept secure and only used for research purposes, except as otherwise required by law. Your name will not be divulged in any reports of this research. All data will be identified only by an ID number, not by any name. The research may be audiotaped or videotaped for research purposes only. Any audio or videotapes collected as part of the research will be destroyed once the study analysis is complete.

CONTACT INFORMATION:

Questions, Concerns, or Complaints: If you have any questions, concerns or complaints about this research study, its procedures, risks and benefits, please contact the Principal Investigator, at the telephone number listed on the first page of this form.

If you have any questions or complaints about your rights as a research subject, contact:

- **Mail:**
Study Subject Adviser
Chesapeake Research Review, Inc.
7063 Columbia Gateway Drive, Suite 110
Columbia, MD 21046
- **Call collect:** 410-884-2900
- **Email:** adviser@irbinfo.com

Please complete the section below if you agree to participate.

I, _____, agree to participate in this research
[your name]
project with the Michael Cohen Group. I understand that I may stop participation at any
time.

Signature

Date

A copy of this consent form will be given to you to keep.