

## Appendix E. Informed Consent

### Purpose

The purpose of this study is to learn more about current processes and challenges related to identifying English learners for special education services, and the strategies that schools and districts are using to overcome such challenges. The findings from this study will help the Department plan a nationally representative study of these important issues. We have reviewed recent research on identifying ELs with special needs and are now conducting case study site visits with a sample of school districts across the U.S.

### Risks and Discomfort

There are few anticipated or known risks in participating in this study.

### Benefits

Your participation will ensure that policymakers, researchers, and educators have access to important information on procedures and practices used to identify ELs with disabilities, the challenges in making such identifications, and the strategies that are being used to overcome the challenges.

### Confidentiality

We will treat the information obtained in this study in a confidential manner, to the extent provided by law. We will not identify the names of individuals, or the schools or districts in which they work, in any reports or public briefings. Your responses will be used to summarize findings in an aggregate manner that does not associate responses to a specific site or individual.

### More Information

If you would like more information about this study, you may contact the Project Director, Tamara Nimkoff, at Westat at (919) 474-0719 or [tamaranimkoff@westat.com](mailto:tamaranimkoff@westat.com), or the U.S. Department of Education Project Officer for the study, Jean Yan, at (202) 205-6212 or [Jean.Yan@ed.gov](mailto:Jean.Yan@ed.gov). For questions regarding your rights as a subject participating in this research, please contact the Westat IRB Administrator at [irb@westat.com](mailto:irb@westat.com), or (301) 610-8828.

### ***Informed Consent:***

I have read the above information. I have asked questions and received answers. I consent to participate in the study.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Position: \_\_\_\_\_

District/School Name: \_\_\_\_\_