Appendix B.1 Informed Consent Form Updated 5.15.13

OMB #: 0970-0413 Expiration Date: XX/XX/XXXX

The Paperwork Reduction Act Burden Statement: This collection of information is voluntary and will be used for the Subsidized and Transitional Employment Demonstration (STED) Evaluation Project. Public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 0970-XXXX and it expires XX/XX/XXXX.

STED Informed Consent Form

You are invited to take part in a research study called the Subsidized and Transitional Employment Demonstration (STED). The goal of STED is to test employment programs for people with a variety of barriers to regular employment. STED is funded by the U.S. Department of Health and Human Services (HHS) and is being conducted by MDRC and its research partners: MEF Associates, Branch Associates, and D.I.R. Inc.

What is the STED program?

STED programs provide temporary employment subsidies and other kinds of support. Their goal is to help people with a variety of barriers to employment in the regular labor market find and hold jobs.

Who is eligible to be in the STED program?

Depending on the program you are interested in, you will be eligible to be in the STED program if you fall into any of these groups:

- **Low-Income:** Anyone whose income falls below 200% of the federal poverty level or who is currently receiving TANF benefits. For example, a family or household of four would have to earn a combined annual income of less than \$47,000 in order to be eligible for the program.
- [Additional eligibility criteria will be determined based on the programs selected for the evaluation.].

There are not enough funds to enroll everyone into the program. Everyone who is eligible and interested in the program will be given an equal chance of being assigned to one of two groups:

- 1) **Program group.** If you are assigned to the program group, you will be able to enroll in the program and interview for a temporary job.
- 2) **Control group**. If you are assigned to the control group, you will not be able to enroll in the STED program, although you may enroll in other similar programs and services in your community.

A process called random assignment will be used to decide who gets assigned to one of these two groups. Random assignment is like a lottery. It has nothing to do with your age, race, gender or other personal traits.

What does it mean to be a part of this study?

If you agree to be in the study by signing this form, the research team will collect three types of information about you:

- 1) **Background information**. You will be asked to provide information about yourself such as your age, race, gender, social security number, employment, and education.
- 2) **Contact data**. In the future, the research team may contact you to complete an interview or survey about your work experience, relationships with your children, and/or experience with the program. To help contact you, you will be asked to list the names of people who know how to reach you.
- 3) **Other information.** By signing this form, you give the research team permission to collect additional information:
 - The Department of Health and Human Services will provide the research team with information about your participation in the STED program if you are assigned to the program group.

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- Researchers will collect information from state and federal agencies about things like your earnings and TANF receipt or other public benefits. The research team will use your social security number to get this information.
- Researchers may collect information from agencies in the community about your participation in other programs.

How will my information be kept private?

The research team will follow strict rules to protect your privacy. All research staff working on this project are trained to protect private information, and have signed a pledge to keep your information private to the extent permitted by law. Any papers that include your name or other ID's will be kept in a locked area, and any computer files with your name will be protected by a password. This applies to case file reviews and administrative records. **Your name will never be used in any report written for the project**. However, please keep in mind that MDRC will have to report to the authorities if you tell a member of the research team that you want to harm yourself or someone else. Also, MDRC may have to give up information about you if ordered to do so by law.

What are the benefits and risks of participating in the study?

By participating in the study, you will help policymakers and other programs around the country learn how to create better employment programs for people in a similar situation as you. You can refuse to answer any question that you do not want to answer. There is a possible risk of loss of privacy. However, the research team has protections in place to securely store the data and minimize this risk.

You are not required to take part in the study.

If you decide not to be in the study, there is no penalty. Your decision will not affect your receipt of any public benefits, including TANF. However, only people who are in the study will have a chance to be in this program. If you agree to participate and then change your mind, you may drop out of the study at any time by contacting the person listed below. If you choose to drop out, the research team may still use information that was collected about you while you were in the study.

When does my participation begin?

This agreement is effective from the date you sign it (below) for 10 years.

What does signing this form mean? It means you agree to the following statement:

"I have read this form and agree to be in the Subsidized and Transitional Employment Demonstration (STED) study. I know that my participation is voluntary, that all information about me will be kept private to the extent permitted by law, and that my name will never appear in any public document. I know that I can withdraw from the study at any time without penalty. I understand that the research team will get information about me from programs and agencies, as described above."

YOUR NAME (PRINT)	YOUR SIGNATURE	DATE

If you have questions about the program, please speak with a staff person. If you have questions about the study, please contact Vanessa Martin at 212-340-8696 or vanessa.martin@mdrc.org, or by mail at: MDRC

16 East 34th Street, 19th floor NY, NY 10016

Appendix B.1 Informed Consent Form OMB #: 0970-0413 Expiration Date: XX/XX/XXXX

Agreement to Take Part in the Subsidized and Transitional Employment Demonstration (STED)

The Paperwork Reduction Act Burden Statement: This collection of information is voluntary and will be used for the Subsidized and Transitional Employment Demonstration (STED) Evaluation Project. Public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 0970-0413 and it expires 10/31/2015.

You are invited to join in a research study called the Subsidized and Transitional Employment Demonstration (STED). STED is funded by the U.S. Department of Health and Human Services. It is being run by an organization called MDRC, along with MEF Associates, Branch Associates, and DIR, Inc. STED programs try to help people find and hold jobs.

What is being studied?

In New York City, STED is testing a program called the Young Adult Internship Program (YAIP). YAIP starts with a 3 week orientation, followed by an 11 week paid internship placement with a local employer. The program is run by the NYC Department of Youth and Community Development (DYCD).

Who is eligible to be in the program?

To be eligible for YAIP, you must meet the following requirements:

- 16 to 24 years old
- Not working and not in school;
- Read at a 6th grade level or higher; and
- Complete the YAIP application process.

YAIP does not have enough funding to serve all young adults who are eligible for the program. During 2013 and 2014, certain YAIP programs will be using a process called random assignment to decide which eligible young adults will be accepted into the program. Random assignment is like a lottery. It has nothing to do with your age, race, gender or other personal traits. Young adults who are found to be eligible and appropriate for YAIP, and who agree to be in the study by signing this form, will be randomly assigned to one of two groups:

- 3) **Program group.** If you are assigned to the program group, you will be invited to a YAIP program orientation.
- 4) **Control group**. If you are assigned to the control group, you will not be able to enroll in YAIP for about one year, but staff will give you the names of other organizations that may be able to help you.

About 6 out of every 10 young adults who go through random assignment will be assigned to the program group.

What does it mean to be a part of this study?

If you agree to be in the study by signing this form, the research team will collect three types of information about you:

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- 4) **Background information**. DYCD will give MDRC information from your YAIP application. This will include things like your age, race, gender, social security number, and your employment and education history.
- 5) **Contact data**. In the future, the research team may contact you to complete an interview or survey about your work experience, services you have received, and other topics. To help contact you, you will be asked to list the names and contact information of people who know how to reach you.
- 6) **Other information.** By signing this form, you give the research team permission to collect other data:
 - DYCD will give MDRC information about your participation in YAIP program and other programs they run.
 - Researchers will collect information from government agencies about your earnings, high
 school and college enrollment, performance, and completion, and General Educational
 Development (GED) tests you may take. The privacy of education records is protected under
 a law called FERPA. By signing this form, you agree to waive your rights under Family
 Educational Rights and Privacy Act (FERPA) and allow MDRC to access your records from
 any education institutions you have attended or will attend.
 - The research team may collect information from other agencies about your participation in education, employment, or public assistance programs, and any involvement you may have with the justice system.

How will my information be kept private?

The research team will follow strict rules to protect your privacy. All research staff working on this project are trained to protect private information. They have also signed a pledge to keep your information private, as permitted by law. Any papers that include your name or other ID's will be kept in a locked area. Any computer files with your name will be protected by a password. This applies to case file reviews, administrative records, and survey data. **Your name will never be used in any report written for the project**. All of the study results will be reported for groups of individuals; no results will be analyzed or reported for individuals. However, please keep in mind that MDRC will have to report to the authorities if you tell a member of the research team that you want to harm yourself or someone else.

What are the benefits and risks of participating in the study?

By joining the study, you will be helping the study team and policymakers learn how to create better programs for young people in the same situation you are in. You can refuse to answer any question that you do not want to answer. There is a possible risk of loss of privacy, but the research team has protections in place to securely store the data and minimize this risk.

You are not required to take part in the study.

If you decide not to be in the study, there is no penalty. However, if the YAIP program you are applying to is conducting random assignment, only people who agree to be in the study will have a chance to enroll in YAIP. If you agree to join the study and then change your mind, you may drop out of the study by contacting the person listed below. If you choose to drop out, the research team may still use information that was collected about you while you were in the study.

Expiration Date: XX/XX/XXXX

When does my participation begin?

This agreement is effective from the date you sign it (below) for up to 10 years to assess long-term benefits.

What does signing this form mean? It means you agree to the following statement:

Parent/Guardian's Statement of Permission and FERPA Consent to Release Records

"I have read this form and agree to be in the Subsidized and Transitional Employment Demonstration (STED) study. I know that my participation is voluntary, that all information about me will be kept private, and that my name will never appear in any public document. I know that I can withdraw from the study at any time without penalty. I understand that the research team will get information about me from programs and agencies, as described above."

If I am under the age of 18, I understand that I will need parent/guardian consent (below) to participate in the STED study unless I am a legally emancipated minor. *Check this box if you are a legally emancipated minor:* \Box

Your Name (Print)
Date

Your Signature

My child is under the age of 18. I have read this form and give my permission for my child to participate in the STED study as explained above. I give my permission for any educational institution my child has attended or will attend to release my child's academic records, financial aid records, and social security number to MDRC for this research. I know that I can withdraw my permission for any of the activities listed in this form at any time before my child becomes 18. I understand that once my child becomes 18, he will no longer need my permission to be in the study. I further understand that by being in this study, MDRC researchers will use my child's Social Security Number to obtain information on educational records data, National Student Clearinghouse data, and employment and earnings records for up to ten years.

Parent/Guardian Name (Print)
Date

Parent/Guardian Signature

If you have questions about the program, please speak with a staff person. If you have questions about the study, please contact Vanessa Martin at 1-800-221-3165 extension 8696 or vanessa.martin@mdrc.org, or by mail at:

MDRC 16 East 34th Street, 19th floor New York, NY 10016