**Attachment B – Consent Package for Parent/Caregivers: Parent/Caregiver Consent Cover Letter, Parent/Caregiver Passive Consent Information**

**OMB BURDEN STATEMENT**: According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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 0594-0524.  The time required to complete this information collection is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**Parent/Caregiver Consent Cover Letter**

[DATE]

Dear Parent,

In this packet, you will find information about the Digital Nutrition Education Materials pilot activities taking place in your child’s classroom. The United States Department of Agriculture (USDA) Food and Nutrition Service (FNS) is developing nutrition education materials that will eventually be made available to all teachers for free. Michael Cohen Group (MCG) and Applied Curiosity Research (ACR) will be gathering feedback on these materials from teachers and students across the country.

*In the coming months, your child will have the exciting opportunity to be a part of informing the development of these materials so that they are relevant, engaging, and effective for all students.*

The pilot activities will be taking place between <<DATE>> and <<DATE>>. Your child’s teacher has agreed to conduct the pilot activities. Your child will not be graded for his/her performance on these activities. They are meant to be an engaging, relevant, and appealing addition to your child’s class.

On the following pages, you will find:

* Details of the pilot research activities
* Information about an opportunity for your child to participate in a focus group
* Your child’s rights as a research participant
* Directions to follow if you do *not* want your child to participate

We look forward to working with your child.

Sincerely,

Gerad O’Shea

**OMB BURDEN STATEMENT**: According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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 0594-0524.  The time required to complete this information collection is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**Parent/Caregiver Passive Consent Information**

|  |  |
| --- | --- |
| **Study Title** | USDA FNS Digital Nutrition Education Materials for Middle School Students and Teachers |
| **Protocol Number** | XXX |
| **Principal Investigator** | Gerad O’Shea |
| **Contact Information** | Phone: 646-801-4261Email: goshea@appliedcuriosityresearch.com |

**Background and Purpose:** Your child is invited to participate in a research study conducted by MCG and ACR as part of a USDA FNS sponsored effort to develop education materials that will raise awareness of the importance of healthy food choices among middle school children. The materials will include informational texts, interactive activities, and videos that promote healthy food choices in middle school students, and are aligned to the appropriate learning standards.

**Process:** Your child will participate in these activities during his/her class period. After the materials are implemented, your child will be asked to complete a brief survey, which will be used to understand the effectiveness of the materials. Your child will not be graded on his/her performance related to these materials.

Your child *may* also be asked to participate in a focus group interview in which he/she will discuss the activities and materials. During the interview, your child will be asked to complete a brief survey about your child’s demographics. He/she can refuse to answer any of the questions. The interview will take place in school in a group setting with other students from your child’s class. About 75 students will participate in total across the country.

**Possible Risks and Benefits:** We do not anticipate any risks associated with being in this study. We do not promise that your child will receive any benefits from this study. Most people enjoy participating in the research process, and this research will support free teacher resources.

**Compensation:** Your child will not receive monetary compensation for their participation.

**Participant’s Rights:** Participation in this study is voluntary. We will not work with your child if you contact us using the information in this packet. You and your child have the right to change your mind and withdraw consent or discontinue participation at any time without any penalty or loss of the benefits to which your child is otherwise entitled. Your child has the right to refuse to answer particular questions.

The research may be audiotaped for research purposes only. Your child’s name will never be used in any reports of our research findings. Your child’s information and comments will be kept secure and only used for research purposes, except as otherwise required by law. All data will be identified only by an ID number, not by any name. All data will be stored on a secured server.

**Contact Information:** If you have any questions, concerns or complaints about thisresearch 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 child’s rights as a research subject, contact:

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

**IMPORTANT**

**If you DO NOT want your child to complete the assessment at the end of the pilot or participate in the focus group interview, please contact Gerad O’Shea via phone or email by <<DATE>>:**

Phone: 646-801-4261

Email: goshea@appliedcuriosityresearch.com