



Center for
Autism and
Developmental
Disabilities
Research and
Epidemiology

Study to Explore Early Development

<Date>

<Name>

<Address>

<Address>

Dear Ms. <Name>,

Thank you for your interest in the *Study to Explore Early Development (SEED)*. This packet has information for you to keep and to get you started in the study.

1. **Consent form** - The consent form gives you all of the information about you and your child's participation in this study. This copy is for you to keep. When you come to the clinic visit, we will review this form with you, answer your questions, and have you sign the form. The copy in this folder is for you to review so that you have a chance to think about questions you may have.
2. **Bill of Rights** - This fact sheet explains your rights as a participant in SEED.
3. **Study Flow Chart** - The flow chart describes each step of the study. It shows the time that each step may take and the incentives you will get along the way. Please use the chart to identify what steps you and your child have finished. You can also use the chart to see what the next step will be. Overall, if you finish all the steps it will take you about <number> hours and you will receive \$<amount>.

If you have any questions about the information in the packet or about SEED, please call <site study coordinator> at <phone number>.

If you would like to speak to anyone at any time during study, please call our main number at <phone number>. You may also call me directly at <phone number>.

We look forward to talking with you soon in the next steps of the study, the interviews about your pregnancy and your child's health during the first few years.

Sincerely,

<site project coordinator>

Thank you for your interest and support!