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

## **APPENDIX G Childhood and Family Experiences Study** Informed Assent Form for Adolescents (Ages 12-17) **Interviewer Script**

Hello, my name is	_ and I work at an organiza	ation named MDRC. I'm	here today to talk with you
while my colleague,	, talks with your	[DETERMINE YOU	TH'S TERM FOR PCG/LEGAL
GUARDIAN AND RELATIONS	SHIP AND USE THAT TERM	HERE AND THROUGHO	OUT THE INTERVIEW]. Your
has said that it is	O.K. for me to talk with y	ou today as long as it is	O.K. with you. We are
trying to understand familio	es' experiences with mone	y.	
are no right or wrong answ few questions about yourse of your favorite things are. questions about how much Other questions ask about some people have a lot of r voluntary; it's up to you. If yon to the next question. If y any time. It is O.K. to tell m don't understand a question	ers to my questions; I just elf, like what grade you're in Some questions are about money your family has an your ideas about the amout money while others have vou don't feel like answering you decide you don't want to skip a que n so that I can repeat it or I be interested. Your opinion	want to know what you in (if you are still attend to what your life is like. It what your tall and if your tall and of money that other yery little money. Answering a question, just tell to do any more, please question or stop. You call ask it a different way. Answering and ideas will help	ding school) and what some for example, I have some ks with you about money. If people have, such as why ering my questions is the and we will skip it and go at tell me and we can stop at an also let me know if you although the interview if researchers and people who

Your name will not be on any of the answer sheets, so no one will know how you answered these questions. Instead, my answer sheets will have a number on them, like this. [SHOW YOUTH ID NUMBER ON THE ANSWER BOOKLET] Only the people I work with will be able to see the answer sheets I use today. We also have a special thing called a Certificate of Confidentiality from the U.S. government. This means we will not tell anyone what you tell us even if a judge or a court asks for it. The only time we will say anything is if the law says we have to say something. For example, if we are worried that you or someone else is in danger. If you tell us that you or someone else is getting hurt or may get hurt, we will tell people who are responsible for protecting children and teenagers.

If you agree to answer my questions today, at the end of the interview you will receive a \$25 gift card as a thank you. Even if you choose not to answer some or any of my questions, you will still get a gift card.

This collection of information is voluntary and will be used to understanding the families' experiences with money. Public reporting burden for this collection of information is estimated to average 53 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 number and expiration date for this collection are OMB #: 0970-XXXX, Exp: XX/XX/XXXX. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Sam Wulfsohn at MDRC via e-mail at Samantha.wulfsohn@mdrc.org.

Even though your	has said it is O.K. fo	r us to talk with you	today, you can still de	cide not to do	
this. No one will be upse	t if you don't want to ar	nswer my questions	or if you change your r	mind and want	
to stop. Also, if you answ	er the questions but th	en change your min	d later, you or your	can let	
me know and we will era	se the interview and no	ot use it in our study	<b>'.</b>		
Do you have any questio	ns before we start? [W	RITE DOWN AND AN	NSWER CHILD/YOUTH'S	S QUESTIONS ]	
If you have any question your questions answered		, I've given your	a number they o	can call to get	
Are you willing to partici	pate in an interview tod	lay? [CIRCLE CHILD/	YOUTH'S RESPONSE]		
YES					
NO					
[IF CHILD/YOUTH INDICA SAY IT IS O.K., THANK HII	•			TILL DOESN'T	
Interviewer's Signature	Date	_			
CHILD/YOUTH PART					
[HAND CHILD/YOUTH AS says: When I sign my nar me, and I agree to be int asked to do and that I me FORM] Please also fill in	ne here I am saying that erviewed for this study. ay stop the interview at	t the information on . I am also saying tha	n this page has been rea at I understand what I a	ad to or by am being	
YOUTH NAME:			DATE		
BIRTHDATE	_				
Youth's Signature	Date	_			

## **AUDIO RECORDING AUTHORIZATION**

There is one more thing. I would like to turn on this recorder while we talk, so that I don't have to try to write down everything you say. Is that okay with you?

YES [HAVE CHILD/YOUTH SIGN AND DATE AUDIO RECORDING PORTION OF ASSENT FORM]

**NO** [IF CHILD/YOUTH INDICATES NO, ASK WHY AND TRY TO ADDRESS CONCERNS. IF HE/SHE STILL SEEMS HESITANT TO HAVE YOU RECORD THE INTERVIEW SAY, "That's okay – I will ask my questions and just take notes on what you say. We don't have to use the recorder today."]

Youth's Signature	Date

Thank you. Here is a copy of this form for you to keep. You do not have to sign it if you don't want to. [REMOVE AND GIVE CHILD/YOUTH BLANK COPY OF ASSENT FORM] O.K., now we are ready to get started.