Information and Communications Technology Needs Assessment Survey Informed Consent Form

This form will be the first page of the online survey and also be the cover page to the print version.

Final version of this form will be vetted and approved by the labor unions and FRA

Purpose:

The attached questionnaire is part of a survey being conducted by the US Department of Transportation Volpe Center on behalf of the Federal Railroad Administration Office of Research, Development and Technology (FRA RD&T).

The purpose of the survey is to learn more about Information and Communications Technology (ICT), which relates to the technology and tools that railroaders, like you, use to share, distribute, gather and communicate information. Our goal is to understand how best to communicate important safety information to you and the railroad industry, generally, and specifically as part of the FRA RD&T *Railroaders' Guide to Healthy Sleep* website. Participation means only completing the attached questionnaire.

Research Procedures:

Should you agree to participate, the questionnaire should take you 15–20 minutes to complete, whether online or on paper. If you have already taken this survey previously, we ask that you decline to participate a second time.

Benefits and Potential Risks:

There is no expected benefit to you as a result of completing this survey. However, your participation will help the FRA RD&T to better understand railroader ICT use and preferences, in order to improve the *Railroaders' Guide to Healthy Sleep* website and best reach and communicate with railroaders, like you.

The potential risks of participating in this survey are less than those ordinarily encountered in daily life or during the performance of routine work. There is a slight risk that your responses may cause you to change your ICT behaviors.

Confidentiality:

A unique ID number has been assigned to you. The ID number will allow each questionnaire to be tracked so that only non-respondents will receive reminders. The list of participants and corresponding ID numbers will be kept in a secure location, separate from responses.

No identifiable information is being requested of you or otherwise collected. All online and paper responses will be kept confidential. Electronic and paper responses will be maintained in a secure location. In any study reporting, only grouped summary information would be presented. No data would identify any individual.

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Taking this survey is completely voluntary. You have the right to decline to participate, or to discontinue your participation at any point without penalty. You have the right to refuse to answer any question(s) for any reason.

Questions:				
If you have any questions or woul contact the project director, Dr. H 2522. The Office of Management contact OMB at (202)	Heidi Howarth, and Budget ha	at heidi.howarth@dot. Is approved this project	gov or 617	7-494-
If you are completing this questio sheet with the questionnaire. If y appropriate circle below the ques	you are comple	• • •		his
"I understand the above informat	tion. I voluntar	ily consent to participat	e in the su	ırvey."
		1/2		
Signature	Date			
	(Fill in	the circle that applies)	O Yes	O No