

## **Appendix D: Informed Consent and Discussion Guide for Program Partners and Stakeholders**

*Before we begin, I want to tell you a few things about this study and your participation in it. Please feel free to ask me any questions you might have. We will also email you a copy of this information.*

A team of researchers from the Urban Institute and Chapin Hall at the University of Chicago is working with the U.S. Department of Health and Human Services, Administration for Children and Families (ACF) to identify programs for transition age foster youth that could potentially be included in a federally funded evaluation. ACF is particularly interested in programs that aim to help current and former foster youth succeed in [college/the labor market].

As part of this process, we are talking with representatives from a number of [college success/ETV/employment] programs to learn more about their operation. We will ask you some questions about the [INSERT NAME OF PROGRAM] including questions about the students/youth it serves, the supports it provides, the way it is funded, and any data that your program might collect about its operation. However, this is not an evaluation of your program.

The interview will be conducted by a pair of researchers and will last no more than an hour. We may contact you following the interview to request clarification. Your participation in the study is completely voluntary. You can choose not to participate, skip any questions you would prefer not to answer or end the interview at any time without penalty.

We will share what we learn about different [college success/ETV/employment] programs with ACF and use this information to decide if any of these programs might be good candidates for a rigorous evaluation based on ACF priorities.

The risks associated with participating in this study are minimal. Some of the information we gather may be included in a report to ACF, an issue brief, or other publication. These publications will not identify you by name but may include the name of your program, and it is possible that your identity could be inferred given your position. We do not intend to quote any of the representatives we talk with, but if for any reason we wanted to quote you in a publication, we would ask for your permission first.

**DO YOU HAVE ANY QUESTIONS ABOUT THE STUDY?  
DO YOU AGREE TO PARTICIPATE IN THE STUDY?**

If you have questions or concerns about the study, please contact:

Mike Pergamit  
Urban Institute  
202-261-5276  
[mpergamit@urban.org](mailto:mpergamit@urban.org)

Mark Courtney  
Chapin Hall at the University of Chicago  
773.702.1219  
[markc@uchicago.edu](mailto:markc@uchicago.edu)

If you agree to participate in this study and feel that your rights have been violated or that you have not been treated fairly, contact:

SSA-Chapin Hall IRB Coordinator  
University of Chicago School of Social Services Administration

969 E. 60<sup>th</sup> Street  
Chicago, IL 60637 / (773-834-0402)

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## **Guide for Program Partners and Stakeholders**

- a. Program/partnership
  - i. How would you describe your program/organization/ business?
  - ii. What are the main components of your program/organization/business?
  - iii. What is your involvement with the [program under evaluation]?
- b. Relationship to program under evaluation
  - I. Is there a formal agreement or MOU?
  - II. Do you participate in decision making and program development?
- c. Type and frequency of interactions with program
- d. Perceptions of program's goals and priorities?
- e. Type of support provided to program or participants
- f. Biggest challenges and success with respect to the relationship