PARENT CONSENT FORM Acknowledgment of Voluntary Participation and Audio Recording

A team of researchers from the Urban Institute, Child Trends, 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 see if the Family Unification Program [known as [SITE NAME FOR PROGRAM] in [SITE]] is working. We would like to talk to you because you received a housing voucher through this program.

Before we get started, there are several important things for you to understand:

- Everyone who works on this study has signed a privacy pledge requiring them not to tell anyone outside the research staff anything you tell me during an interview. The researchers on this study will keep all of the information completely private. Only the people doing the research will see any information that identifies you personally. In addition, the transcription service who have also signed pledges of privacy, will hear the interviews to transcribe them. We will report on the things that you tell us but your name will never be used. We will not report anything that could reveal your identity.
- Your participation is completely voluntary. That means you may choose to skip any questions you wish or refuse to participate at any time.
- Participating or choosing not to participate in this research will have no effect on your housing assistance or any other public assistance.
- With your permission, the discussion will be **recorded**.
- The discussion will last about one and a half hours.
- You will receive a \$35 gift card as a thank you.
- Researchers are required to take steps, including reporting to authorities, a situation where they believe someone they speak to may harm themselves or others.

If you have any questions about the study, you may call Michael Pergamit at the Urban Institute, 1-800-XXX-XXX (toll-free number).

| Respondent Name (please print) | | |
|--|-----------|------|
| I agree to participate in this research. | | |
| | Signature | Date |
| I agree to have this interview recorded. | | |
| | Signature | Date |

| To be completed before the interview | |
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