You are invited to be in a research project entitled "(title)." The purpose of the study is to see if certain tests would be helpful when your special education teacher plans your vocational evaluation and/or when she completes your individualized transition plan when you are ready to graduate.

You will be given the Kaufman Brief Intelligence Test (K-BIT) and the Slosson Intelligence Test Revised (SIT-R) during one class period in April or May. You will not get any extra credit, and if you don't want to participate, there will be no effect on your school grades. Even if you agree today to participate by signing this form, you can change your mind at any time when we begin testing or at any time during testing.

If you choose to be tested, and if these test scores prove to be helpful, the researchers will report these scores to your teacher. If they are not helpful, the scores will not be shared with your teacher.

The researchers would like to compare these tests to other test scores that your teacher has from previous testing. If you sign below, you are agreeing to let your teacher give these scores to the researchers.

Your name will not be on any of the forms. The researchers will use a code number instead. The researchers will keep a list of names and code numbers that will be destroyed once the researchers have shared any important information with your teacher.

If you have any questions or concerns about this study, you may contact either (the researcher) at (phone number) or (the other researcher) at (phone number).

This consent document has been approved for use for one year by the Human Subjects Institutional Review Board as indicated by the stamped date and signature of the board chair in the upper right corner. You should not participate if the stamped date is more than one year old.
Your signature below indicates that you agree

- to be tested with the Kaufman Brief Intelligence Test and the Slosson Intelligence Test-Revised;
- for these scores, if found to be useful, to be reported to your teacher; and
- for your teacher to give the researcher your latest individual intelligence test scores.

____________________________________
Print name here

__________________________________
Signature Date

Consent obtained by: _______________ ___________
initials of researcher Date

Anonymous Survey Consent - Sample

You are invited to participate in a research project entitled "(title)" designed to analyze the sexual attitudes of college freshmen. The study is being conducted by (principal investigator) and (student investigator) from Western Michigan University, Department of _________________. This research is being conducted as part of the(thesis/dissertation) requirements for (student investigator).

This survey is comprised of 25 multiple choice and true/false questions and will take approximately 10 minutes to complete. Your replies will be completely anonymous, so do not put your name anywhere on the form. You may choose to not answer any question and simply leave it blank. If you choose to not participate in this survey, you may either return the blank survey or you may discard it in the box provided. Returning the survey indicates your consent for use of the answers you supply. If you have any questions, you may contact (principal investigator) at (phone number), (student investigator) at(phone number), the Human Subjects Institutional Review Board (269-387-8293) or the vice president for research (269-387-8298).

This consent document has been approved for use for one year by the Human Subjects Institutional Review Board as indicated by the stamped date and signature of the board chair in the upper right corner. You should not participate in this project if the stamped date is more than one year old.