Thursday, October 27, 2016

Dear Parents,

The [Enter Investigator name or department] in association with the \_\_\_\_\_ Parish Public School District would like to conduct a study involving the ebook curriculum in your child’s kindergarten class.

The purpose of this study is to test the effectiveness of the Living Books ebook curriculum for all children. As part of the test, we would like to: 1.) test your child for the presence of a *single* genetic marker; and 2.) look for a group of behaviors that may indicate a child is at risk of learning issues. It is believe that the Living Books ebook program may be more effective at teaching children at risk of these specific issues.

First, what you need to know:

1. Taking part in the study is entirely voluntary and will in no way affect your child’s ability to take part in your school’s curriculum.
2. You may choose to not take part at any time without any effect on your child’s education program.
3. You may receive no benefit from taking part. The research may give us knowledge that may help students in the future.

Second, what we are asking for:

1. A simple cheek swab with a cotton swab provided you child agrees.
2. A passive assessment of your child’s behavior performed by independent researcher (not your child’s teacher).
3. Sharing certain data about your child with the [Enter Investigator name or department] researchers including name, ethnicity, gender, free/reduced lunch status, the results from a pre-literacy assessment (performed three times per year) and information automatically collected by the ebook program (time on device, answers to questions about the ebook content).

What will be done with your child’s information:

All information (including genetic information and passive assessment) will be used by the research team at the [Enter Investigator name or department] and will be shared with no one – including your school.

Information will be collected into a dataset to be used only by qualified researchers and personal identifying information will be removed. The anonymous data will be kept for up to five years exclusively on the Picard Center’s secure isolated network and used for research reports and academic publication. The researchers will only release information in groups so that your child cannot be identified.

If you have any questions about this study, please contact Dr. \_\_\_\_\_ at the [Enter Investigator name or department] 337-482-#### or [\_\_\_\_\_\_\_@Louisiana.edu](mailto:_______@Louisiana.edu). You may also address questions to the University’s Institutional Review Board, Dr. David Yarbrough, [IRB@Louisiana.edu](mailto:IRB@Louisiana.edu).

YOU MAY KEEP THIS PAGE FOR YOUR INFORMATION.

**Living Books Ebook Study.**

Permission to study is given to the University of Louisiana at Lafayette and the [Enter Investigator name or department].

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I agree to the sharing of this information for this study for my child.

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Print

Parent’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Print

Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_