

Title: Efficacy of Supplemental Video in Distance Learning

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You are invited to participate in research investigating the validity and/or benefits derived from supplemental material (video lectures) in online classes. Should you volunteer we will ask you to complete several short surveys over the course of the semester regarding your opinion on how well you feel the video lectures aided your comprehension or performance on exams. We will also require access to your exam scores and individual answers, provided by your professor, which will be held in the strictest confidentiality by the research team. The surveys will be issued immediately before and after you complete your exams.

It is *not* a requirement for you to watch the video lectures in order to complete the surveys. Should you choose not to watch the video lectures, a different set of surveys will be issued to you prior to and immediately following an exam. Each survey should take no longer than 5-10 minutes to complete and will consist of questions with a rating scale of 1-7 (in which 1 is strongly disagree and 7 is strongly agree).

You will not be penalized for choosing not to participate in this research and are free to withdraw or skip the surveys at any time. While your professor may decide to offer extra credit for participation in a manner of their choosing, there can only be incurred benefit, not incurred penalization.

There are no risks associated with this research except that it will require you to take more time than if you did an exam alone. We recommend scheduling at least twenty minutes extra in order to complete the before and after surveys during your exam time.

Any identifying information will be erased from the records once the data has been compiled. At no point will I or any of my research aides release your information to anyone else.

Should you have further questions, please feel free to reach out to me via email or phone and I will be glad to answer them. For questions regarding specifics of exams of extra credit (if any), please contact your professor.

Agreement to Participate in Research

I have read the above study and have had an opportunity to ask questions, which have been answered to my satisfaction. I agree voluntarily to participate in the study as described.

X

X

X

Participant's Name

Participant's Signature

Date

Denial to Participate in Research

I have read the above study and have had an opportunity to ask questions, which have been answered to my satisfaction. I do not wish to participate in this research study.

X

X

X

Participant's Name

Participant's Signature

Date