

Dear Parent,

University School is going to be part of a research study associated with the Challenge Success project in the School of Education at Stanford University. Your child is invited to participate in this study. The researchers are interested in learning about students' social, emotional, and physical well-being, their educational goals and their views on the academic climate and expectations at their school and at home. We are also studying how student leaders may participate in enacting change related to academic stress in their school.

Here is what your child will participate in:

- (1) 1 questionnaire this year
- (2) A possible group or individual interview at the school with a Stanford researcher. These will be audiotape recorded.
- (3) A survey or interview in future years if the school continues participation in the research project.

The survey will be conducted at your child's school and will take approximately 40 - 50 minutes to complete. We will randomly select a small number of students from the school to take part in the group or individual interviews. If your child is one of those students, the interview will be conducted at school and will last between 30 minutes and 1 hour. Audiotapes from the interviews will only be heard by the researchers and will be erased once the project is completed. When audiotapes are transcribed, all names mentioned will be replaced with pseudonyms.

If your child's school continues to participate in this research project next year or in years to come, we would like to include your child in the same research in future years.

There are no risks to your child's involvement in the study, and the benefits may be that results from the study will provide insight into decreasing academic stress, increasing student engagement, and fostering greater student voice in school. There will be no payment for participation in this study.

Your child's participation in the study is voluntary. All information he/she provides will be confidential, except in the event that we learn about an instance of abuse, or of your child threatening to hurt himself/herself or another person. In these instances, we are legally obligated, as are all teachers and health care workers, to make a report to school and social welfare professionals (e.g., Child Protective Services). If your child does not wish to answer a particular question, he or she always has the right to refuse to do so and can also decide at any point to withdraw from participating without penalty. As a parent or guardian, you have the right to withdraw consent at any time and the right to discontinue your child's participation at any time without penalty. Your child's individual privacy will be maintained in all published and written data resulting from the study.

If you are willing to have your child participate, please sign this consent form and return it to your child's school. If you have any questions, concerns or complaints about this research study, its procedures, risks and benefits, you should ask the Protocol Director, Denise Pope at (650) 736-1779. If you are not satisfied with how this study is being conducted, or if you have any concerns, complaints, or general questions about the research or your rights as a participant, please contact the Stanford Institutional Review Board (IRB) to

Speak to someone independent of the research team at (650)-723-2480 or toll free at 1-866-680-2906. You can also write to the Stanford IRB, Stanford University, Stanford, CA 94305-5401.

Please circle your response:

1. I give consent for my son/daughter to be a part of this research study.  
**Yes**                      **No**
  
2. I give consent for my son/daughter to have his/her interview audio taped.  
**Yes**                      **No**
  
3. I give consent for my son/daughter to participate in this research in future years, if this school continues with the study.  
**Yes**                      **No**

Parent / Guardian's Name (Please Print): \_\_\_\_\_

Parent / Guardian's Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Child's Name (Please Print): \_\_\_\_\_

Protocol Approval Date: 04/24/2009  
Protocol Expiration Date: 04/23/2010