

## Informed Consent Agreement to Participate In Usability Study of WSU WayFinding

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Description of Study: I, **Logan Dihel** have been asked to participate in a usability test of new software created as part of the above persons' (henceforth, "the researchers") course project for CptS 443/543 at Washington State University. Your participation in this usability test will help the researchers to better understand the software's strengths and weaknesses. You have been asked to spend about 25 minutes participating in this test. This will involve your doing some or all of the following things:

- Reading aloud and studying brief task descriptions.
- Interacting with a computer.
- interacting with the researchers and/or other students.
- thinking aloud (explaining what you're doing and thinking), and
- filling out questionnaires.

The researchers will record the session on videotape. Although your voice, and possibly your face, will appear on the recording, your name will not be on the recording. The recordings will be viewed only by the instructor and students affiliated with CptS 443/543 at Washington State University in order to fulfill a course requirement. When the researchers describe their work to the class, they will not use your name.

Risks and Benefits Expected: The study will not incur any risks beyond the minimal risks associated with interacting with a computer. The study is not expected to help you directly. The results may help the researchers to improve the design of their software.

Confidentiality: Any information about you that is obtained from this study, including what you say, will be confidential. Your real name will be kept in a locked file and only the researchers will have access to it. Only your code name will be on the videotape and in reports of the study.

Right to Refuse or End Participation: You may refuse to participate in this study or stop participating at any time.

Certification: By signing below, you certify that you have read and that you understand the foregoing, that you have been given satisfactory answers to your inquiries concerning projects procedures and other matters, and that you have been advised that you are free to withdraw your consent and to discontinue participation in the usability test at any time.

You herewith give your consent to participate in this test with the understanding that such consent does not waive any of your legal rights, nor does it release the researchers or any agent thereof from liability for negligence. You understand that you shall remain anonymous in all written and verbal reports of this test. You will be given a copy of this form to keep.

*Logan Dihel*

**4/24/2022**

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Signature of participant

Date

*Abir*

**04/24/2022**

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Signature of researcher

Date

(If you cannot obtain satisfactory answers to your questions or have comments or complaints about your treatment in this test, contact Professor Daniel Olivares, Washington State University, daniel.olivares@wsu.edu.)