“I Will” Cards

**Consent Form**

Your child has been invited to be a participant in a study concerning social skills interventions to be used in the general education setting. Your child has been selected for this study as a participant in Social Communication Supports and Services as a student diagnosed with high-functioning autism.

I ask that you read this consent form in its entirety and ask any questions you may have before agreeing to allow your child to be a participant in this study.

The study will be conducted by Andrea Sour who is satisfying the requirements for a Master’s Degree in Special Education with a concentration in Autism at Texas State University.

Procedure:

During the intervention, your child will be read social stories related to a target behavior they are having difficulty with in the general education classroom. Your child will then have a card with positive problem solving statements that they can keep with them during their general education class as a reminder to help them through difficult times. They will be observed in these situations to determine if the target behavior decreases over time with the intervention.

The study will require your son/daughter to be pulled from his/her general education for direct social skills instruction as specified in their IEP. Your son/daughter will also be observed as a group member during structured and unstructured times during their school day while they interact with general education peers. Behavior and social skills that result from these interactions will be analyzed in order to see whether your child’s participation in the direct social skills sessions affects them socially and/or behaviorally.

Risks and Benefits of Being in the Study:

As a result of this study, the desired outcome will be for your child to successfully problem solve difficult situations independently in the general education setting. It is possible that your child may become frustrated when attempting to use some of the strategies on the card in the general education setting. If this occurs, the supervising teacher will provide prompts and help them work through the situation in order to de-escalate the frustration.

Confidentiality:

Your child’s name and all information obtained prior to or during the study will remain confidential and anonymous. All observations and information gathering procedures will be in strict confidence with campus and district policies and will only be shared with Dr. E. Amanda Boutot, supervising faculty member and with your child’s Admission, Review and Dismissal committee. Results will also be shared with you upon request.

Voluntary Participation

I understand that my child’s participation in this study is completely voluntary and I have the right to remove my child from the study at any time.

Contacts and Questions:

Please contact me at 512-570-6531 to obtain your child’s results. The data taken from this research will be maintained for approximately three years in their Special Education folder with their tracking teacher.

Should you have any question or concerns pertaining to this study, pertinent questions about the research, research participants' rights, and/or research-related injuries to participants should be directed to the IRB chair, Dr. Jon Lasser (512-245-3413 – [lasser@txstate.edu](mailto:lasser@txstate.edu)), or to Ms. Becky Northcut, Compliance Specialist (512-245-2102).

Statement of Consent:

I grant permission for my son/daughter, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to participate in research regarding the effects of a social skills intervention in the general education classroom at Rutledge Elementary School.

I have read the above information and asked any questions and received answers to the questions I might have about this study.

Parent signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Researcher signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_