

## **ADULT PARTICIPANT INFORMED CONSENT**

Department of Computer Science – CS 464

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**Participant Study Title:** *Context-Awareness Sound Alerts*

**PRINCIPAL INVESTIGATOR(S):** Dan Butcher, Elita Danilyuk, Zack Lamb, and Zach Lowe

**SPONSOR:** Dr. Francisco Ortega

### **WHAT IF I HAVE QUESTIONS?**

For questions or concerns about the study, you may contact **Zachary Lowe** at **970-314-1417**. For questions regarding the rights of research subjects, any complaints or comments regarding the manner in which the study is being conducted, contact the CSU Institutional Review Board at: [CSU\\_IRB@colostate.edu](mailto:CSU_IRB@colostate.edu); 970-491-1553.

### **WHAT IS THE PURPOSE OF THIS STUDY?**

The purpose of this research study is to examine the effectiveness of mobile phone alert tones in various simulated sound environments.

### **WHY AM I BEING INVITED TO TAKE PART IN THIS RESEARCH?**

You are being asked to participate in the study for the purposes of our completion of the CS 464 class requirements.

### **WHERE IS THE STUDY GOING TO TAKE PLACE AND HOW LONG WILL IT LAST?**

This study is taking place in Morgan Library room 23. The total expected time commitment for this study is about 15 minutes. 2 Minutes for the demographics survey, 1 minute for the experiment example, 10 minutes for the experiment itself, and 2 minutes for the debrief and conclusion.

### **WHAT WILL I BE ASKED TO DO?**

If you volunteer to participate in this study, you will be asked to do the following:

- Wear headphones.
- Operate a mouse and keyboard.
- Type on the keyboard for short intervals of time.
- Respond to an audible alert by clicking a button on a screen.

### **ARE THERE ANY BENEFITS FROM TAKING PART IN THIS STUDY?**

There may be no direct benefit to you as a participant in this study. However, we hope to learn more about the effectiveness of mobile phone alert tones to further contribute to the existing body of research surrounding this topic.

**WHAT ARE THE POSSIBLE RISKS AND DISCOMFORTS?**

There are no known risks included with this study. While the level of risk is minimal and the loss of confidentiality is protected by anonymous generation of participant ID numbers, you may become uncomfortable with the volume of the simulated sound environments and alerts.

**WILL I RECEIVE ANY COMPENSATION FOR TAKING PART IN THIS STUDY?**

You will not be compensated for participating in this research.

**WHO WILL SEE THE INFORMATION THAT I GIVE?**

All information gathered in this study will be kept as confidential as possible. Your privacy is very important to us, and the researchers will take every measure to protect it. Your information may be given out if required by law; however, the researchers will do their best to make sure that any information that is released will not identify you. No reference will be made in written or oral materials that could link you to this study. For this study, we will assign a participant ID to your data so that the only place your name will appear in our records is on the consent form. Our data spreadsheet which links your demographic responses to your participant ID will not include any identifying information that is personal to you. Only the research team will have access to the link between your participant ID and your data. All records will be stored in an encrypted, cloud-based database system for three weeks after completion of the study. After the storage time, the information gathered will be destroyed. We may be asked to share the research files with the sponsor for auditing and grading purposes.

The research team works to ensure confidentiality to the degree permitted by technology. It is possible, although unlikely, that unauthorized individuals could gain access to your responses because you are responding online. However, your participation in this online survey involves risks similar to a person's everyday use of the internet.

**DO I HAVE TO TAKE PART IN THE STUDY?**

Your participation in this study is voluntary. You may refuse to participate in this study or in any part of this study. You may withdraw at any time without prejudice to your relations with CSU. You are encouraged to ask questions about this study at the beginning or any time during the research study.

**Participant Consent:**

Your signature acknowledges that you have read the information stated and voluntarily wish to participate in this research. Your signature also acknowledges that you have received, on the date signed, a copy of this document containing \_\_ pages.

C Cortez  
Signature of participant

4/24/23  
Date

Claire Cortez  
Name of participant

Zach Lowe  
Signature of person providing information

4/24/23  
Date

Zach Lowe  
Name of person providing information

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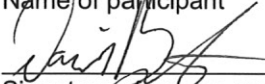
Signature of participant

4/24/2023

Date

Blake Davis

Name of participant



Signature of person providing information

4/24/23

Date

Dan Butcher

Name of person providing information

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Signature of participant

4/21/23  
Date

Michael Cunningham  
Name of participant

  
Signature of person providing information

4/21/23  
Date

Zach Lowe  
Name of person providing information

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Irene Zang  
Signature of participant

4/24/23  
Date

Irene Zang  
Name of participant

Wendy  
Signature of person providing information

4/24/23  
Date

Dan Butler  
Name of person providing information

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Sam McKay  
Signature of participant

4/24/23  
Date

Sam McKay  
Name of participant

Sam McKay  
Signature of person providing information

4-24-23  
Date

Dan Butcher  
Name of person providing information

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Vanonika Wilson  
Signature of participant

4-24-23  
Date

Vanonika Wilson  
Name of participant

[Signature]  
Signature of person providing information

4/24/23  
Date

Dan Butcher  
Name of person providing information



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Matthew Sturgeon  
Signature of participant

4-24-2023  
Date

Matthew Sturgeon  
Name of participant

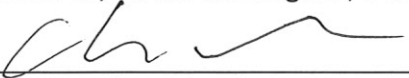
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Signature of person providing information

4/24/23  
Date

Dan Butcher  
Name of person providing information

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\_\_\_\_\_  
Signature of participant

24 Apr  
\_\_\_\_\_  
Date

Chris LaBerge  
\_\_\_\_\_  
Name of participant

  
\_\_\_\_\_  
Signature of person providing information

4-24-23  
\_\_\_\_\_  
Date

Zach Lowe  
\_\_\_\_\_  
Name of person providing information

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Sophia Girard  
Signature of participant

4/26/2023  
Date

Sophia Girard  
Name of participant

[Signature]  
Signature of person providing information

4/26/23  
Date

Dan Butcher  
Name of person providing information

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\_\_\_\_\_  
Signature of participant

4/24/23  
\_\_\_\_\_  
Date

Elijah Weetman  
\_\_\_\_\_  
Name of participant

  
\_\_\_\_\_  
Signature of person providing information

4/24/23  
\_\_\_\_\_  
Date

Elijah Weetman Zach Lowe  
\_\_\_\_\_  
Name of person providing information


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\_\_\_\_\_  
Signature of participant

4-26-23  
Date

ANNIE RUDNICK  
\_\_\_\_\_  
Name of participant

  
\_\_\_\_\_  
Signature of person providing information

4-26-23  
Date

Zack Lowe  
\_\_\_\_\_  
Name of person providing information

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Matthew Hoover  
Signature of participant

04/21/23  
Date

Matthew Hoover  
Name of participant

Zach Lowe  
Signature of person providing information

4/21/23  
Date

Zach Lowe  
Name of person providing information

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\_\_\_\_\_  
Signature of participant

04/26/23  
Date

Logan Goodman  
\_\_\_\_\_  
Name of participant

  
\_\_\_\_\_  
Signature of person providing information

04-26-23  
Date

Zach Lowe  
\_\_\_\_\_  
Name of person providing information

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\_\_\_\_\_  
Signature of participant

4/28/23  
\_\_\_\_\_  
Date

Alizée Barney  
\_\_\_\_\_  
Name of participant

  
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Signature of person providing information

4-28-23  
\_\_\_\_\_  
Date

Zach Lowe  
\_\_\_\_\_  
Name of person providing information



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Melissa Clemens  
Signature of participant

4/28/23  
Date

Melissa Clemens  
Name of participant

[Signature]  
Signature of person providing information

4/28/23  
Date

Dan Butcher  
Name of person providing information

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Chandler Coars  
Signature of participant

4/28/23  
Date

Chandler Coars  
Name of participant

Jan Butcher  
Signature of person providing information

4/28/23  
Date

Jan Butcher  
Name of person providing information

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Kevin Finger

Signature of participant

4/21/23

Date

Kevin Finger

Name of participant

David Butcher

Signature of person providing information

4/21/23


Date

David Butcher

Name of person providing information

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\_\_\_\_\_  
Signature of participant  
Kyle Thibault

4/21/23  
\_\_\_\_\_  
Date

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Name of participant

  
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Signature of person providing information

4-21-23  
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Date

Zachary Lowe  
\_\_\_\_\_  
Name of person providing information

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Bailey Hust

Signature of participant

April 24, 2023

Date

Bailey Hust

Name of participant

[Signature]

Signature of person providing information

4-21-23

Date

Zach Lowe

Name of person providing information

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\_\_\_\_\_  
Signature of participant

4/29/23  
Date

Jordan Rust  
Name of participant

  
\_\_\_\_\_  
Signature of person providing information

4/19/23  
Date

Zach Lowe  
Name of person providing information

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Ian Dutt  
Signature of participant

4-19-23  
Date

Ian Dutt  
Name of participant

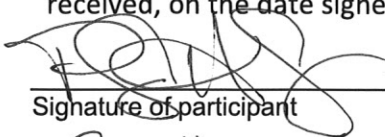
Dan Butcher  
Signature of person providing information

4/19/23  
Date

Dan Butcher  
Name of person providing information

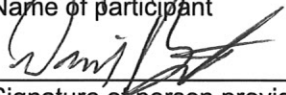
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Signature of participant

4/19/23  
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Date

Paige Hansen  
\_\_\_\_\_  
Name of participant

  
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Signature of person providing information


4/19/23  
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\_\_\_\_\_  
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Signature of participant

Adam Ruelas

\_\_\_\_\_  
Name of participant

4/19/2023

\_\_\_\_\_  
Date



\_\_\_\_\_  
Signature of person providing information

Zach Lowe

\_\_\_\_\_  
Name of person providing information

4/19/2023

\_\_\_\_\_  
Date

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Tanmay  
Signature of participant

19 APRIL 2023  
Date

TANMAY NAIDU  
Name of participant

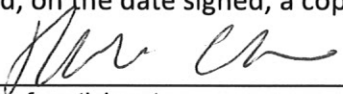
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Signature of person providing information

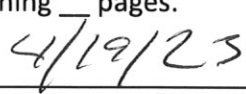
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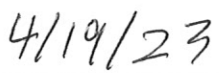
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\_\_\_\_\_  
Signature of participant

  
\_\_\_\_\_  
Date

Helen (Nei) Ross  
\_\_\_\_\_  
Name of participant

  
\_\_\_\_\_  
Signature of person providing information

  
\_\_\_\_\_  
Date

Zach Lowe  
\_\_\_\_\_  
Name of person providing information

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Marilyn M. Butcher  
Signature of participant

4-21-23  
Date

Marilyn Butcher  
Name of participant

[Signature]  
Signature of person providing information

4/21/23  
Date

Dan Butcher  
Name of person providing information