**CONSENT TO PARTICIPATE IN A RESEARCH STUDY**

**TITLE:** **Investigating the Feasibility and Usability of MicroBrowser**

**PRINCIPAL INVESTIGATOR:** Emilio Zegarra, Graduate Student

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**The purpose of this study** is to investigate the usability and feasibility of the MicroBrowser application for navigating discussion forums. The MicroBrowser application is a computer based application that uses visualization techniques and discussion patterns to augment the presentation of discussion threads. The MicroBrowser application aims to facilitate discovery of knowledge generated in discussion forums. Approximately 12 college students, at least 18 years of age or older, will be invited to participate in this research study. If you agree to participate, **you will complete a screening questionnaire to verify your eligibility. If you are not eligible, the study will end. If you are eligible, you will be asked to solve a series of tasks using two different computer applications. Before using each application, you will complete a brief tutorial. Then, you will be asked to complete 12 tasks. Following each task, you will give your perceived difficulty in completing the task. After completing all tasks with one application, you will then repeat the same steps with the other one. Once all tasks are completed, you will be asked to complete a brief survey**. These tasks will **take you approximately 1 hour** to complete.

**There is little risk** involved in this study. No invasive procedures or medications are included. **The major potential risk is a breach of confidentiality**, but we will do everything possible to protect your privacy such as not using your name or any other identifiable personal information in the data collected. Another potential risk associated with your participation is the **frustration** some people experience when they attempt to solve difficult problems. This is not unusual, and if you like, we will discuss your feelings and concerns when you have completed the tasks.

There are **no costs** to you for participating in this study, and you will receive **no direct benefit** from participating in this study. For completing the experiment, you will be compensated with a gift card worth $10 from Amazon.com.

**All records** pertaining to your involvement in this study are kept **strictly confidential** and any data that includes your identitywill be stored in locked files, and will be retained by us for a minimum of seven years per University regulations. Your identity will not be revealed in any description or publications of this research. Results will not be shared with your instructors or University administrators, and will have no effect on your standing at this University. It is possible that authorized representatives from the University of Pittsburgh Research Conduct and Compliance Office (including the University of Pittsburgh IRB) may review your data for the purpose of monitoring the conduct of this study.

**Your participation in this study is completely voluntary**. You may refuse to take part in it, or you may stop participating at any time, even after signing this form. Your decision will not affect your relationship with the University of Pittsburgh.

If you have questions about this research study, you may contact the investigators listed at the beginning of this consent form. If you have questions about your rights as a research subject, please contact the Human Subjects Protection Advocate at the University of Pittsburgh IRB Office, 1.866.212.2668.

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SUBJECT’S CERTIFICATION

* I have read the consent form for this study and any questions I had, including explanation of all terminology, have been answered to my satisfaction. A copy of this consent form will be provided to me.
* I understand that I am encouraged to ask questions about any aspect of this research study during the course of this study, and that those questions will be answered by the researchers listed on the first page of this form.
* I understand that my participation in this study is voluntary and that I am free to refuse to participate or to withdraw my consent and discontinue my participation in this study at any time without affecting my future relationship with this institution.
* I agree to participate in this study.

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Subject’s Signature Date

CERTIFICATION OF INFORMED CONSENT

I certify that I have explained the nature and purpose of this research study to the above-named individual, and I have discussed the potential benefits and possible risks of study participation. Any questions the individual has about this study have been answered, and we will always be available to address future questions as they arise.

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Printed Name of Person Obtaining Consent Role in Research Study

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Signature of Person Obtaining Consent Date