

Consent Form

Northeastern University, Department of: Khoury College of Computer Sciences

Name of Investigator(s): *Dr. Savage*

Title of Project: Designing Intelligent Interfaces for Gig Workers

Request to Participate in Research

We/I would like to invite you to participate in a web-based study. The study is part of a research study whose purpose is to understand how to design better intelligent interfaces for gig workers.

Key Information

- Your consent is being sought for participation in a research project and your participation is voluntary.
- The purpose of the research is to design better intelligent interfaces for gig workers
- The anticipated amount of time that your participation will take will be: 15 minutes to install our intelligent tool and use it throughout a week-long process.
- The procedures that you will be asked to complete will be: install the tool; complete a pre-survey; use the tool for a week; complete a post-survey.
- The foreseeable risks to the subject: none.
- The potential benefits to the subject: you will be able to learn how to use new tools to help your work and earnings.
- Appropriate alternative procedures, if any: none

Our pre and post surveys should take about 5-10 minutes to complete.

We are asking you to participate in this study because you are a worker on a crowdsourcing platform. **You must be at least 18 years old to take this survey.**

The decision to participate in this research project is voluntary. You do not have to participate and you can refuse to answer any question. Even if you begin the web-based online survey, you can stop at any time.

There are no foreseeable risks or discomforts to you for taking part in this study.

As a token of our appreciation for completing the survey, you will be given bonuses on your worker account.

Your part in this study is anonymous to the researcher(s). However, because of the nature of web based studies, it is possible that respondents could be identified by the IP address or other electronic record associated with the response. Neither the researcher nor anyone involved with this survey will be capturing those data. Any reports or publications based on this research will use only group data and will not identify you or any individual as being affiliated with this project.

If you have any questions regarding electronic privacy, please contact Northeastern University's Office of Information Security via phone at 617-373-7901, or via email at privacy@northeastern.edu.

If you have any questions about this study, please contact Dr. Savage (s.savage@northeastern.edu), the Principal Investigator.

If you have any questions regarding your rights as a research participant, please contact the Human Subject Research Protection, Mail Stop: 560-177, 360 Huntington Avenue, Northeastern University, Boston, MA 02115. Tel: 617.373.4588, Email: IRBReview@northeastern.edu. You may call anonymously if you wish.

This study has been reviewed and approved by the Northeastern University Institutional Review Board.

By clicking on the "accept" button below you are indicating that you consent to participate in this study. Please print out a copy of this consent screen or download a copy of the consent form for your records.

Thank you for your time.

Dr. Savage, s.savage@northeastern.edu