



# IRB INFORMED CONSENT or AGREEMENT TO PARTICIPATE FORM

IRB No.:10-046-MAR-XPD Rev. No./Date:

**Consent Form Title:** Student Assent Form

**Project Title:** Exploration of Natural Design Strategies of Novice Engineers

**Principal Investigator:** Dr. Fred Martin Associate Professor

**Contact Information:** UMass Lowell Computer Science, 1 University Avenue, Lowell MA 01854,  
fredm@cs.uml.edu, 978/934-1964

**Co-PI(s):**

**Student Investigator(s):** Mark Sherman

**Date Submitted:** April 21, 2010

*This form has been approved for use by the UML IRB and is valid for up to one year from the approval date.  
(PIs -Give a copy of this form to the study participant after they sign it. Originals are to be retained by the PI.)*

**Authorized IRB Approval Signature:** 

**Approval Date:** April 21, 2010

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You are being asked to enroll in a program titled "Engineering & Modeling Activities." This program is a collection of interesting activities that involve thinking like an engineer. Part of the each activity will be to design instructions that could be used to get another person to solve the activity like you did. This program will meet for 6 sessions, each session is 90 minutes long. This class will meet in Olsen 302 on UMass Lowell's North Campus.

We are interested in how you think about design problems. We are asking for your permission to use parts of your work for publications about this program. Things we may use include your writing, drawings, and explanations. Your name, grade, town, and any other information that can be used to identify you will be removed from everything we use right away. We won't keep your name or identifying information at all.

We are asking for your permission to video and audio record you during the activities. These videos are for us to better understand how you are thinking during the activities. Your name and other information that can be used to identify you will not be attached to video or audio. These videos will only be seen by the teachers conducting the activities, and will not be published without additional written permission from you and your parent/guardian.

You will be asked to fill out a questionnaire about your favorite subjects, your heritage, and your parents' education. Your name will not be on this.

There are no risks involved in being a participant in this study. There is no payment or financial reward that is provided as compensation for participation in this study.

If you change your mind, you may leave the program at any time without any consequences to you from the Youth Development Organization or the University of Massachusetts Lowell.

All information collected will be confidential. Your name or any other identification will never be disclosed. We will protect your privacy and confidentiality. Recorded tapes will be destroyed no later than three years after the completion of this research project.

If you do not understand any portion of this form we will be happy to provide a complete explanation. Questions relating to this research project are welcome at any time. Please contact Dr. Fred Martin, Associate Professor, UMass Lowell Computer Science, 1 University Avenue, Lowell MA 01854, fredm@cs.uml.edu 978 -934-1964. Thank you.

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**PRINCIPAL INVESTIGATOR SIGNATURE(S)** -See definition of PI for who is authorized to sign here.

1. Printed Name: **FRED MARTIN**

Signature:



Date: **APRIL 21, 2010**

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**PERSON OBTAINING CONSENT**

Printed Name: **HOWARD STICKLOR**

Date:

Signature:

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**PARTICIPANT SIGNATURE**

*I understand the foreseeable risks and/or discomfort that have been described in this document. I have read the statements contained herein, have had the opportunity to fully discuss my concerns and questions, and fully understand the nature and character of my involvement in this research program as a participant and the attendant risks and consequences.*

**Research Participant:**

Printed Name:

Date:

Signature: