**Name of agency**

**Participant Agreement**

This agreement is for your participation in the Agency research project, in collaboration with CTR. The purpose of this research project is to observe and interview participants as they interact with a mock insert interaction to be tested. We will use what we learn through those observations to make recommended improvements to the process.

The project will take place between XX/XX/XXXX and XX/XX/XXXX. We would like to better understand challenges that people have insert interaction to be tested. We ask that you read and sign this agreement as acknowledgement of your rights and expectations as a participant in this process, which are listed below.

**Please email or call us if you have any questions, concerns, or technical issues with signing this agreement.** Contact info: Name, Email, Phone.

## **You’re not required to take part in this research project and your participation will not affect your eligibility for benefits. You can end your participation in this research project at any time without any impact on whether you receive benefits.** While we’d love to hear your perspective, your participation is completely voluntary. If you no longer wish to take part, you can opt out at any time. Stopping your participation in this research project at any time will not affect any claim that you may have filed or are thinking of filing.

**We appreciate your time. In return for your participation and completing the interview, you will receive an honorarium of a $50 Visa gift card.** Your time and input make it possible for us to improve the system.

**We will be using information from the sessions to define and develop examples of how we can improve the Unemployment Insurance experience**. By signing this form and participating in the session, you give us the right to use the information associated with your participation solely to improve the insert interaction to be tested experience. Your feedback will be kept confidential.

**All interviews will be conducted by someone from the CTR and include a notetaker who will be present in-person or online.** In all cases we will take written notes during the session. We might share quotes from interviews with the agency’s staff members to help explain the participant experience when filing a claim.

## **We will protect your privacy. Agency and CTR will seek to protect all personal identifying information to the full extent permitted under all applicable laws.** We will not share your name or any other personally identifying information such as your address, email, phone number, birth date, or social security number with the Agency**.** Written notes will be maintained and disposed of by the Agency and CTR consistent with State and federal law whether or not you withdraw your consent or complete the project. **You can withdraw your consent or change your mind about what you have shared with us.** You can do this during the session, at the end of the session, or after the session by contacting Name, Email, Phone. **We appreciate you taking part in this session.** Thank you very much for your time and feedback!

[ ] I agree to participate in this research as described above.

[ ] I understand that my participation in this interview will not affect whether I receive unemployment insurance benefits or affect any open issues that I may have in the unemployment benefit system.  
Please type your name below to indicate that you have read your rights and consent to the above:

Name:  
  
Date:

ZIP/Postal Code

Email Address\*

Phone Number