Parental Consent for Youth Participation in 4-H Program Evaluation Studies 2009-2010

The Oregon 4-H program conducts regular assessments of its programs throughout the year. These assessments provide important information regarding program quality and impact. Typically, these assessments are composed of brief (1-2 page) questionnaires about the program. The results of these assessments are used for program improvement, marketing and fundraising, and sharing with other 4-H professionals through journal articles and conference presentations.

We ask parents of 4-H members to sign this general consent for their child to participate in 4-H program assessments at the beginning of each 4-H year. Please note the following information regarding your consent:

1) Your child’s participation in any assessment is completely voluntary. He or she is not required to participate, and his or her assent to participate will be secured before administering any assessment.

2) Your child does not have to answer any questions he or she does not want to, and he or she may stop answering questions at any time.

3) You and your child’s right to participate in the 4-H program will not be affected should you choose not to sign this form, or if your child decides not to participate in the assessment.

4) The assessments conducted under this consent involve minimal or no risk. Your additional consent will be secured before involving your child in an assessment or research that involves greater risk, or is deemed more invasive than is assumed with this general consent.

5) In most cases there will be no direct benefit to your child for participating in these assessments. However, there is indirect benefit in that information we gather from the assessments helps to secure ongoing and future funding to support the 4-H Youth Development program in Oregon.

6) Most assessments will be anonymous in that we will not know which assessment results are your child’s. In the event that we need to identify your child’s answers, all information provided by your child will be kept confidential to the extent available by law. In addition, only group responses will be shared with others, and no names will be connected to individual answers.

_________________________________________  _______________________
4-H Member Name                                County

_________________________________________  _______________________
Parent Signature                                Date