Parental/Guardian Permission Form for Department Pool Participants Earning Credit

Your child, ___________________________, is invited to take part in a study named Social Interactions. The study is designed to learn more about how certain character traits are detected and relate to behavior. It is being conducted by the principle investigator, Professor David Amodio, and the co-investigator, Lee Jasperse, a graduate student in the Department of Psychology.

If you give permission for participation in this study, your child will be asked to complete a computerized image categorization task, as well as an economic decision-making game. Your child’s participation will take about 1 hour, and will earn your child 1 credit for laboratory participation towards the course research requirement. When your child completes the study, a thorough verbal and written explanation of it will be provided.

There are no known risks associated with participation in this research beyond those of everyday life. Although your child will receive no direct benefits for participation in this study, your child may become more aware of how knowledge is discovered in psychology and help the investigator better understand how attitudes affect behavior.

Taking part in this study is voluntary. Not taking part or withdrawing after the study has begun will not affect grades or academic standing in any way. If your child withdraws at any time, they will be compensated based on the time they participated in the experiment. Your child has the right to skip or not answer any questions they prefer not to answer.

Confidentiality of your child’s research records will be strictly maintained by assigning unique, confidential identification codes to your child’s responses, thereby de-identifying stored data. The de-identified data from the study will be kept at least until 5 years after publication, as recommended by the American Psychological Association. De-identified data may also be posted online when research results are published.

If there is anything about the study or taking part in it that is unclear or that you do not understand, if you have questions or wish to report a research-related problem, you may contact the principal investigator, Prof. David Amodio, at 212-998-3875, david.amodio@nyu.edu, Meyer 473, or the co-investigator, Lee Jasperse, at (707) 342-0309, ljj26@nyu.edu, or Meyer 464. For questions about your child’s rights as a research participant, you may contact the University Committee on Activities Involving Human Subjects (UCAIHS), NYU, (212) 998-4808 or ask.humansubjects@nyu.edu, 665 Broadway, Suite 804, New York, NY 10012.

You have received a copy of this permission document to keep.

Permission

Parent’s Signature ___________________________ Date ____________
Parental Permission Form for Department Pool Participants Earning Money

Your child, ____________________________, is invited to take part in a study named Social Interactions. The study is designed to learn more about how certain character traits are detected and relate to behavior. It is being conducted by the principle investigator, Professor David Amodio, and the co-investigator, Lee Jasperse, a graduate student in the Department of Psychology.

If you give permission for participation in this study, your child will be asked to complete a computerized image categorization task, as well as an economic decision-making game. Your child's participation will take about 1 hour, and will earn your child $10. When your child completes the study, a thorough verbal and written explanation of it will be provided.

There are no known risks associated with participation in this research beyond those of everyday life. Although your child will receive no direct benefits for participation in this study, your child may become more aware of how knowledge is discovered in psychology and help the investigator better understand how attitudes affect behavior.

Taking part in this study is voluntary. Not taking part or withdrawing after the study has begun will not affect grades or academic standing in any way. If your child withdraws at any time, they will be compensated based on the time they participated in the experiment. Your child has the right to skip or not answer any questions they prefer not to answer.

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You have received a copy of this permission document to keep.

Permission

Parent's Signature ____________________________ Date ____________

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