

INFORMED CONSENT FORM 2C



CALGARY YOUTH SCIENCE FAIR

You are invited to take part in a research study. Before you decide to be a part of this study, you need to understand the risks and benefits. This consent form provides information about the research. If you agree to participate in this research, you will be asked to sign this consent form before taking part. This process is known as *Informed Consent*.

Student Researcher (1): <u>Lilian Brooks</u> School: <u>R.T. Alderman</u> School Phone: <u>403-777-7520</u>	Student Researcher (2): School: School Phone:
Project Title: <u>Concentration Contemplation</u>	
Science Fair Coordinator (Adult Supervisor): Name: <u>Karen Burkell</u> Phone:	
Project Description: <u>Playing different sounds while people do reading comprehensions and find things around a room with instructions.</u>	
Your benefits from participating: <u>Help give data to a scientific study</u>	
Your risks from participating: <u>Some loud or high pitched sounds may irritate participants</u>	
Your time commitment: <u>1hr 30 mins - 2hrs</u>	
The confidentiality of your data: The results of this research will be given with all information about individual participants removed. No personal information will be stored on a computer. All information on paper that could be used to identify individuals will be shredded at the end of the research project.	
Withdrawal: Your participation is voluntary, and you have the right to withdraw at any time for any reason. If you wish to do so, please talk to the Science Fair Coordinator/Adult Supervisor.	
Review: This project has been reviewed by the Ethics Committee of the Calgary Youth Science Fair Society and has received permission to proceed.	
Feedback: The results of this research will be provided to you in the public presentation of the Science Fair Project.	
By signing below, you are agreeing to participate in this study. Name <u>Vivienne Skriver</u> (please print) Signature <u>Vivienne Skriver</u> Date <u>Feb 5, 2025</u> If this participant is under the age of 18, permission of a parent or guardian is also required: I give permission for the person named above to participate in this study. Name <u>Lisa Skriver</u> (please print) Phone <u>403-890-7354</u> Signature <u>Lisa Skriver</u> Date <u>Feb 5, 2025</u>	

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Project Title: Concentration Contemplation

Science Fair Coordinator (Adult Supervisor):
Name: Karen Burkell Phone:

Project Description:
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Name Olivia Love (please print)

Signature Olivia Love Date Feb 5, 2025

If this participant is under the age of 18, permission of a parent or guardian is also required:

I give permission for the person named above to participate in this study.

Name Nicole Love (please print) Phone 4035190264

Signature NICOLE LOVE Date Feb 5, 2025

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By signing below, you are agreeing to participate in this study. Name <u>EMMIT PRINS</u> (please print) Signature <u>Emmit Prins</u> Date <u>FEB 20 2025</u> If this participant is under the age of 18, permission of a parent or guardian is also required: I give permission for the person named above to participate in this study. Name <u>Kristina Prins</u> (please print) Phone <u>403-305-0680</u> Signature <u>Kristina Prins</u> Date <u>Feb 20 2025</u>	

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By signing below, you are agreeing to participate in this study. Name <u>Wartlin Armitage.</u> (please print) Signature <u>[Signature]</u> Date <u>2025/02/05.</u> If this participant is under the age of 18, permission of a parent or guardian is also required: I give permission for the person named above to participate in this study. Name <u>Richard Armitage</u> (please print) Phone <u>403 471 5458</u> Signature <u>[Signature]</u> Date <u>2025/02/05 -</u>	