

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
OFFICE OF ACCOUNTABILITY AND CHOICE
1960 LANDINGS BOULEVARD, SARASOTA, FLORIDA 34231
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CONSENT REQUIREMENTS - ORGANIZATIONAL AND PERSONAL RESEARCH

Instructions: Read and review the consent form requirements below then sign, date, and submit.

Every consent form for parents, students, and/or staff must include all the components below:

1. Letterhead - Use your own letterhead if applicable. Do not use Sarasota County Schools letterhead, even if you are a district employee.
2. Introductions - Explain what and why this request is being made (e.g., dissertation). The introduction must explain that this is not sponsored by Sarasota County Schools.
3. Purpose of research - Provide information about the research and the type of data that will be collected.
4. Activities - Explain what the participant will be asked to do and include information on whether they will be recorded or videotaped.
5. Data - Explain what data will be collected, how confidentiality will be ensured, how data will be stored, if and how data will be shared, and how and when data will be destroyed.
6. Benefits and risks of study - Discuss potential benefits and risks of this study.
7. How to withdraw - Explain that participation in the research study is voluntary and the participant can refuse to participate or withdraw from study at any time without penalty. Instructions on how to withdraw should be included.
8. Contact information of researcher, including phone number and email address.
9. Blank places for relevant signatures, including space for parent/guardian or staff member to indicate consent by adding printed name, signature, date, and phone number. If appropriate, there should be blank spaces for a student to add printed name, signature and date.

I understand and will follow the requirements for consent when conducting organizational and personal research in Sarasota County Schools. I understand at no time should a participant be asked to provide identifying information.

Researcher Name (Print)

Researcher Signature*

Date

* I acknowledge by typing my name above, my electronic signature shall be deemed to have been "signed" and will constitute an "original" when printed from electronic records.