

**University of Wisconsin-Madison  
RESEARCH INFORMATION AND CONSENT FORM**

Dear Parent,

I'm writing to ask if you and your 3- to 5-year-old child would be willing to take part in a research project. This sheet describes it so that you can decide.

**What is this project about?** It's about preschool children's responses to educational TV programs.

**Who can do it?** Any 3- to 5-year-old who is fluent enough in English to understand short TV clips and talk to us can do it.

**What would you and your child have to do?** We would have short play sessions with your child and show your child short clips from *Daniel Tiger's Neighborhood*. It is rated TV-Y and E/I, meaning that it is considered an educational program suited for this age. We'd ask questions about the content and other episodes your child may have seen. Your child could stop participating at any time, if he or she wanted. We would like to video-tape the session. *In order for your child to participate, you would need to complete and return the consent form and attached one-page information sheet.*

**How long will it take and where would it be?** The session would last about 10 minutes. If this letter was sent home from preschool, it would take place at your child's preschool. Other sessions may take place at the Center for Communication Research in Vilas Hall on campus or at the Children's Museum of Madison.

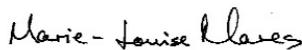
**How will your confidentiality be protected?** Neither your name nor your child's name will be written anywhere in their answers, nor would any names be included in any presentation of the results. Portions of the recordings may be used for educational presentations, but your child's face would never be shown. Recordings will be stored on campus for seven years, per university policy. Your name is not written on the background information sheet, which will be stored separately from the consent form.

**Are there any benefits or risks to you or your child?**

We do not anticipate any direct benefits or risks to you or child. Although there is always a possibility that confidentiality could be breached, we use careful procedures to minimize this risk, as required by the university.

**As a thank you, families would receive \$10 for their child's participation. Children also receive a small gift/toy as a thank you.**

**WHOM SHOULD I CONTACT IF I HAVE QUESTIONS?** If you have questions about either part of the study you should contact me, Professor Louise Mares at (608) 263-2350 or through email at [mares@wisc.edu](mailto:mares@wisc.edu). I am the Principal Investigator for this study. The title of the study is “Improving Learning from Stories and Songs.” If you are not happy with the answers you get, or you have more questions, or want to talk with someone about your rights or your child’s rights when taking part in a research study, you should contact the Education and Social/Behavioral Science IRB office at (608) 263-2320. Thank you very much for considering this project!



Marie-Louise Mares  
Professor,  
Department of Communication Arts,  
University of Wisconsin-Madison

By signing this form, it tells me that you have read this consent form, that you had a chance to ask questions, and that you are okay with having your child participate. Children can only participate if you complete and return both this form and the background information sheet.

**PLEASE FILL OUT THIS FORM IF YOU GIVE CONSENT FOR YOUR CHILD TO BE IN THE STUDY.**

Name of Parent \_\_\_\_\_ Name of Child \_\_\_\_\_

Parent’s Signature \_\_\_\_\_ Date \_\_\_\_\_