

## Informed Consent for Participation in a Research Project

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**Title:** Academic Content and Students with Significant Cognitive Disabilities: How Teacher Interpretation and Choice Impact Access to the General Education Curriculum

### **Purpose of the this Consent Form**

You are invited to volunteer for a research study. I am asking you to take part because you have knowledge of students with cognitive disabilities and their educational needs. I am a PhD candidate in Social Policy at Brandeis University and I'm conducting this study as part of my doctoral dissertation. The purpose of this consent form is to give you information to help you decide whether to participate in my study or not.

### **Procedures**

Your participation in the research will consist of being interviewed by telephone or skype by me, Maria Timberlake. The interview will last approximately one hour, will be conducted at a time convenient to you, and will be audio recorded with your permission. The interview will be informal. I will ask questions about how you make choices about academic goals, what your students need to learn and what professional resources (i.e. courses or books) you have found helpful. I will also ask if I may re-contact you to clarify anything I may not have understood in the initial interview or to ask about topics that we did not discuss that emerged as important later in the study.

### **Purpose of the Interview**

The Individuals with Disabilities Education Act (IDEA) requires that all students with disabilities have access to the general education curriculum, however, the law doesn't define exactly what access means. The purpose of the interview is to understand how special educators interpret "access to the general education curriculum" and how you decide what academic content your students should learn. Your participation will increase my understanding of how teachers make decisions and balance multiple student needs, and this understanding will be communicated to others (policymakers, researches and other teachers) through my dissertation and hopefully, subsequent publications, with the goal of improving the school experiences of students with disabilities.

### **Your Rights**

- Your participation is entirely voluntary.
- You may decide not to answer any interview questions and may stop the interview at any time.
- You may ask any questions regarding the research and they will be answered fully.

### **Risks or Benefits to Participating in this Study**

There are no identified risks associated with participating in the interview. The study will not expose you to any discomfort beyond that associated with talking about your experiences. The fact that you agree or do not agree to participate will not be shared with anyone. In addition, if you choose to take part in the interview, your name, and the name of your school and community, as well as any other identifying information, will be changed in any and all oral and written reports based on the research.

There is no direct benefit to you from being in this study. However, you may enjoy discussing your professional role and your opinion about special education policy with an interested listener. As a former special educator, I am very interested in your experiences and opinions about your profession. Your participation may also benefit students with significant disabilities as well as other special education teachers by increasing our knowledge of how academic curriculum is determined and prioritized for students with complex disabilities.

**Principal Investigator** Susan L. Parish PhD and **Student Researcher:** Maria Timberlake M. Ed., C.A.S.

**Confidentiality**

Your interview responses will be confidential, and your name will only be known to the researcher. Your name, and the name of your school and community, or any other identifying information will not be used in any oral or written reports or publications resulting from this study.

**Questions**

Before you agree to the interview, please feel free to ask the researchers any questions you may have about the study, Maria Timberlake (207)-807-3043, or [mariat@brandeis.edu](mailto:mariat@brandeis.edu) or Susan Parish (781) 7363928 or [slp@brandeis.edu](mailto:slp@brandeis.edu) If you have questions about your rights as a research participant please contact the Brandeis Institutional Review Board at [irb@brandeis.edu](mailto:irb@brandeis.edu) or 781 736-8133.



**Participant’s statement of consent for telephone interview & audio recording of interview:**

This study has been explained to me and I am volunteering to participate in an interview.

Yes \_\_\_\_ No \_\_\_\_

I give my consent to have my phone interview recorded. Yes\_\_\_\_ No\_\_\_\_

I understand that the audio digital file will be transcribed, and kept in a secure location. This consent, including the consent or refusal to audio recording, has been given verbally by the respondent.

Signature of Investigator \_\_\_\_\_ Date \_\_\_\_\_