



Consent to participate in study

By completing this form, you indicate and affirm you are consenting to your child potentially being selected to participate in the Future Forward evaluation and share data with Education Analytics, Inc.

Student First Name: _____ Last Name: _____

Parent/ Guardian First Name: _____ Last Name: _____

By signing this form, I acknowledge my understanding that educational nonprofit Education Analytics, Inc. is working with my child's school, local community partners which may include Boys & Girls Clubs, and University of Wisconsin-Milwaukee ("UWM"). Together, these partners may serve my child with a reading program called "Future Forward." Future Forward has had positive effects on children's reading, and we want to find out if it will work in your community.

- I understand in the Future Forward program, my child may get one-on-one tutoring up to three times per week for one school year. A trained tutor will provide lessons which may occur at school or online. A Family Engagement Coordinator will regularly communicate with our family about our student's progress. For this program, my child may use assessment systems and web video conferencing solutions for online tutoring sessions including but not limited to Renaissance Star Early Literacy.
- By signing this form, I agree to (1) allow my child to be in Future Forward if they are randomly selected for the program; (2) have my child complete the fall, winter, and spring Star Early Literacy assessment; (3) allow Education Analytics, Inc. to access and share my child's reading level assessments, program participation, and Star Early Literacy data with the Future Forward team and EA's subcontractors supporting the Future Forward program, the research team at UWM, and my child's school. These data will cover the 2020 -2021 school year.
- I understand there are no known risks to me or my child in participating in Future Forward if we are selected, or with sharing my child's information with UWM or my local school.
- I understand benefits of this project, if my child completes the Star Early Literacy assessment, include free access to the online reading library "myON reader." This will be provided regardless of if my child is selected for Future Forward. If selected to receive Future Forward services, my child will also receive intensive one-on-one tutoring that may help improve their reading skills throughout the school year.
- I understand my participation in this project is voluntary. I may choose not to take part in this project. I can change my mind later and remove my child from the project at any time. My decision will not change my relationship with my child's school or any community partners.
- I understand all information collected about my child during the course of the study will be kept confidential. No information that identifies my child will be released to anyone except my child's school and the research team at UWM. My child's information will be used to see if Future Forward is working. The program data including my child's data will be deleted from active file servers at EA within 60 days of end of program and will be removed from EA's backup servers within 12 months of data deletion from EA's active file servers.
- If my child is selected to receive Future Forward services, all online tutoring sessions will be recorded to ensure the safety and quality of services and will be available for review by parent or guardian at any time. Additionally, recordings may be utilized by Future Forward team members or Education Analytics staff to study the effectiveness of the tutoring program.
- If I have any questions about Future Forward, I can call Future Forward Executive Director Kate Bauer-Jones at 608-466-4966. If I have any questions about the program evaluation, I can call John Bowser (UWM) at 414-251-9327. If I have any questions about my rights as a research participant, I can call the UWM IRB Office at (414) 662-3544.
- By signing this form, I allow my child to be in a study of the Future Forward Early Literacy Program, and to get Future Forward services if selected.
- I understand I must sign this consent form, complete the Future Forward program enrollment form, and the UWM Informed Consent Form for Parents/ Guardians.
- **I acknowledge filling out this form DOES NOT guarantee participation in the Future Forward tutoring program or evaluation.**

Parent/ Guardian Signature

Date



Program enrollment

This information will be used to send you the Star Early Literacy assessment. Once your child has completed their reading strengths survey, they will be able to access their account with the myON reader library until September of 2021.

Student First Name: _____ Last Name: _____

Parent/ Guardian First Name: _____ Last Name: _____

School: _____ Grade: _____ Date of Birth: _____

Race: American Indian or Alaskan Native
Asian
Black or African American
Native Hawaiian or Other Pacific Islander
White

Ethnicity: Hispanic or Latino
Not Hispanic or Latino

Phone Number: _____ E-mail: _____

Address: _____

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