

Dear Parent/Guardian,

This summer program is taking part in a city-wide summer program evaluation (measurement) project to better understand summer programming in Greater Boston. Several research organizations will help with this measurement project: National Institute on Out-of-School Time (NIOST), Program in Education, Afterschool, and Resiliency (PEAR), American Institutes for Research (AIR), and the National Science Foundation (NSF). With your consent, these research organizations and Boston After School & Beyond (BASB, an organization managing the measurement project) will have secure access to the following demographic and academic information about your child (obtained from this summer program and/or Boston Public Schools): school attended, race/ethnicity, gender, grade level, age, English Language Learner (ELL) status, student participation and attendance in the summer program, school-year attendance information (days present, days tardy, total days of school), test scores, State Assigned Student Identifier (SASID) and Boston Public Schools ID. These data are confidential and will be used only for evaluation.

The following activities and information relates to students who participate in the summer program:

- Researchers and specialists will observe some summer classrooms and activities.
- Students will be asked to fill out a survey called *NIOST Survey on Afterschool Youth Outcomes (SAYO-Y)*. The SAYO-Y is a 10 minute paper or online survey taken during the last week of programming which asks students questions about their program experiences, sense of competence, and future plans. Participation in the survey is voluntary and may stop at any time without penalty. A study researcher will train the students on how to participate in the survey. Individual survey responses will not be shared with afterschool program staff, partner organizations, or any other organization or individual. Should you have any questions about this survey, use of these data, or questions about your rights or your child's rights as a participant in this study, contact Dr. Georgia Hall at (781) 283-2530 or ghall@wellesley.edu (or for questions about your rights contact Nancy L. Marshall at nmarshall@wellesley.edu).
- Students who are currently in (or soon to enter) middle or high school may be asked to fill out a survey called the Holistic Student Assessment (HSA), developed by PEAR. The HSA is a tool that can deepen understanding of students' social and emotional strengths and needs. Students complete a brief survey about themselves, at least once and as many as two times. Student completion of the HSA is voluntary. Students may stop the survey at any time without penalty. Teachers, educators, and support staff will use the survey results to cultivate the strengths, abilities, and academic success of each student. Teachers, educators, and support staff will keep information from the HSA confidential to protect participants. PEAR reserves the right to use all HSA data for both research and educational purposes. Should you have any questions regarding HSA, contact Jane Aibel at 617-484-0466 extension 204 or e-mail jaibel@mclean.harvard.edu.



Summer Measurement Project Consent Form – Please sign and return

Confidentiality of Data Collected

Your child’s participation in the Summer Measurement Project data collection helps us to better understand summer programming in Greater Boston. All data collected will be kept confidential. In public reporting of research findings, only group data and/or de-identified data will be reported. At no time will a public report identify an individual student in any way. The only exception to confidentiality will be in the case of any information disclosed that indicates a child is in any danger. Should that occur, protocols for such disclosure are in place for protection of participants.

Please complete, sign, and return:

By signing this form below, I give permission for my child to participate in the summer measurement project, and I acknowledge that I have read, understand, and agree to all aspects of the measurement project described in this 2-page form. The summer program will provide services to my child regardless of parental consent for student records.

Child’s Name: _____

Parent/Guardian Signature: _____ **Date:** _____

Parent/Guardian Name: _____ **Relationship to Child:** _____

Child’s School: _____

Parent/Guardian Information

Cell: _____ **Home:** _____ **Work:** _____ **Email:** _____

Photo/Video Release

Boston Public Schools, Boston After School & Beyond, and/or their partners and agents may videotape or take pictures of your child’s participation in the Summer Measurement Project using video and/or digital photography. These images may be taken before, during, or after the summer programming. These images may be used for the purpose of sharing your child’s participation, and perspectives associated with your child’s participation, to a public audience. Images may be published, posted, or played through a variety of communication channels, including but not limited to print, television, and/or online. Please sign below to agree.

Parent/Guardian Signature: _____ **Date:** _____