

LENScience

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Participating Schools Assent Form (Student Under 16)

LENScience Healthy Start to Life: Adolescent Education Programme

THIS FORM WILL BE HELD FOR A PERIOD OF 6 YEARS

Project Title: LENSscience Healthy Start to Life: Adolescent Education Programme

Principal Investigator: Jacquie Bay, Director LENSscience, Liggins Institute, University of Auckland

I have read the Participant Information Sheet (Student Under 16) and been given the opportunity to ask any questions and have them answered.

I understand that:

- I am being invited to take part in research about the science we are doing in class with the teachers from school and the Liggins Institute.
- My parents have said I can take part in the research if I want to.
- I can change my mind about taking part at any time up until October 1st 2012 without giving a reason.
- If I take part, I will have to answer 2 questionnaires during this year.
- The LENSscience research teachers may want to look at work that I hand in to my teacher but will not mark this work. They may make a copy of this work to look at later, removing my name.
- I may be asked to take part in an interview at the end of the unit.
- If I agree to being interviewed it will be recorded and a person who has promised not to tell anyone about what I say will write out my answers.
- My school Principal and teachers have promised that my decision to participate or not participate will not affect my school work or grades.
- Information from the project will be kept in a locked cabinet at the University of Auckland and stored for 6 years before being destroyed.
- When the researchers write their report, they will not use the names of the students, parents or caregivers, teachers or schools that took part.

Please complete each section if you would like to take part

My parents have given me permission to take part if I want to and.....

I agree / do not agree to take part in the questionnaires.

I agree / do not agree to my work being seen by LENSscience teachers

I agree / do not agree to LENSscience teachers making a copy of my work

I agree / do not agree to being chosen to be interviewed.

If I am chosen to be interviewed, I agree / do not agree to the interview being recorded

I therefore give my informed consent to take part in the *LENSscience Healthy Start to Life: Adolescent Education Programme* as stated above.

Full Name		
Date of Birth		
School		
Signature		Date: