San Diego Health Careers Opportunity Program (HCOP) Regional Consortium
CONSENT TO PARTICIPATE AS A RESEARCH SUBJECT
PARENT FORM

Sandra Daley, M.D., director of the San Diego Health Careers Opportunity Program (HCOP) Regional Consortium is conducting a research study to find out in what ways career-focused course work and training can increase students' interest in pursuing health and science careers, as well as their ability to do so. Your child has been asked to take part in this study because they are participating in an enrichment program affiliated with HCOP. There will be approximately 155 students a year in this research study.

If your child agrees to be in this study, the following will occur: Your child will be asked to complete a questionnaire at the beginning of their participation and at the end of the training session. He or she may be asked to fill out follow-up questionnaires every year or two for the next ten years. Responses will inform us of which course of study or careers your child has chosen. We will specifically want to know when he/she graduates from high school, whether they apply to and attend college, what career plans they have, and what role if any this training program may have played in helping him/her to achieve their goals. Through participation in this program, the coordinators hope to learn whether this training will benefit future students.

All information collected will be kept completely confidential. Only staff members associated with the analysis and data management will have access to names. Information gathered from students will be summarized without names. Students will NOT be identified individually in any reports or publications. All research records will be kept confidential to the extent provided by law.

Participation in this study includes a minimal risk for potential loss of confidentiality. A possible benefit for your child is sharing their personal academic and career progress. Your child will not receive payment for participation.

A program instructor or program staff member, ______________________, has explained this study to you and has answered your questions. If you have other questions on research-related issues, you may refer them to: José Cruz at (619) 243-1360. You may also call the Human Research Protections Program Office at UCSD (858) 455-5050 to inquire about your child’s rights as a research subject or to report research-related problems you encounter.

Participation in this study is completely voluntary. Your child may refuse to participate or withdraw at any time without jeopardy to his/her class standing, grades or career work. There is no alternative for participation if your child chooses not to participate. Your child will not be withdrawn from the study without his/hers or your consent. If you or your child decide that you no longer wish to continue in this study, you or your child may notify the study by contacting José Cruz at the number listed above.

You signature below signifies that you have read this form and have been given an opportunity to ask any questions you may have.

__________________________  ___________________________
Student’s Name                  Parent’s Name (Please Print)

__________________________  __________________________
Parent’s Signature             Date

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