**Consent to Participate in an Experimental Study
Title:** QWERTY Preference Ratings

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| **Investigator**Erin Buchanan, Ph.D.Department of Psychology214D Hill HallMissouri State University417-836-5592 |  |

**Description:**
You will be judging words for their pleasantness in this study. The experiment will take place on the computer, where you will be shown words one at a time and click on your judgment for each word. You will take a typing speed test as part of the experiment. The entire experiment will take approximately 30 minutes, and you will receive one experimental credit for your participation.

**Risks and Benefits:**
There are no obvious risks of participating in this experiment. The experimental methods and materials are similar to those involved in taking a classroom examination.

**Confidentiality:**
We will not put your name on any of your tests. Only Dr. Buchanan and her assistant will have access to the data collected for this study. All data associated with this study will remain confidential.

**Right to Withdraw:**
You do not have to take part in this study. If you start the study and decide that you do not want to finish, all you have to do is to tell Dr. Buchanan in person, by letter, or by tele­phone at the Department of Psychology, 214D Hill Hall, or 836-5592. Whether or not you choose to participate or to withdraw will not affect your standing with the Department of Psychology, or with the University, and it will not cause you to lose any benefits to which you are entitled. Experimental credit will be prorated based on the amount of time you spent in the study.

**IRB Approval:**
This study has been reviewed by Missouri State University’s Institutional Review Board (IRB). The IRB has determined that this study fulfills the human research subject protections obligations required by state and federal law and University policies. If you have any questions, concerns, or reports regarding your rights as a participant of research, please contact the Office Research Compliance at 836-4132.

**Statement of Consent**
I have read the above information. I have been given a copy of this form. I have had an opportunity to ask questions, and I have received answers. I consent to participate in the study.

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| Signature of Participant | Date |

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