

Consent Form - Students

Research Project:	To investigate students perceptions of Computer Science
Researchers:	[REDACTED] [REDACTED]
Contact details:	[REDACTED]

I, _____ on behalf of: _____,
(Parent / Guardian) (Student)

agree to allow the student named to participate in the research conducted by [REDACTED] that investigates the students perceptions of Computer Science in Ireland.. The purpose of the research is to test and determine factors that may affect students perceptions of Computer Science.

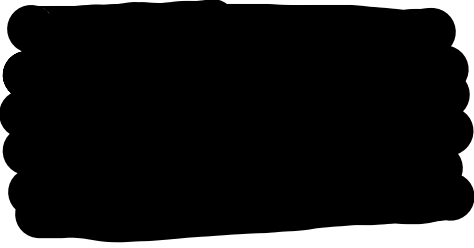
The student's participation will consist essentially of completing a questionnaire, in which the data recorded, will be anonymized. Then the student will be delivered a computing camp during the student's regular scheduled I.T classes.

The data gathered will only be used by the researchers and the findings may be published in suitable conferences and or journals. I understand that the student's confidentiality will be respected. I have received assurance from the researchers that the information that the student will share will remain strictly confidential and that no information that discloses the student's identity will be released or published. The student is free to withdraw from the study at any time and can refuse to answer any of the questions asked or to participate in any of the tasks. All data gathered will be stored in a secure manner and only the above named will have access to it.

There are two copies of the consent form, one of which I may keep. If I have any questions about the research project, I may contact [REDACTED] at the email addresses provided.

In no way will participation or non-participation in this study, effect or influence the student's end of year grade. The student can opt out of this study at any time and this will have no effect or influence in the student's end of year grade.

If during your participation in this study you feel the information and guidelines that you were given have been neglected or disregarded in any way, or if you are unhappy about the process, please contact the:



Please be assured that your concerns will be dealt with in a sensitive manner.

Parent / guardians name: _____

Students name: _____

Signed: _____

Date: _____

Researchers Signature: _____

Date: _____