

INDIANA UNIVERSITY INFORMED CONSENT STATEMENT FOR

Collecting Stories of Informal and Extreme Learning

You are invited to participate in a research study of informal learning or teaching with technology (some of it will be simple self-study and other aspect might be considered highly unusual or “Extreme Learning”). You were selected as a possible subject because of you were identified from an online resource or nominated by someone. Alternatively, you may have found out about this study from someone else and contacted us. Before agreeing to participate, we ask that you read this form and ask any questions you may have before agreeing to be in the study.

The study is being conducted by Dr. Curtis J. Bonk from the Department of Instructional Systems Technology in the School of Education at Indiana University.

STUDY PURPOSE

The purpose of this study is to understand how technology can motivate someone to learn or to teach as well as share one’s learning or teaching. We intend to record many unusual ways that people are learning today in order to inspire others to continue to learn across their lifespan. We also want to record moments wherein technology empowered someone or provided a peak learning experience (e.g., such as a career change).

NUMBER OF PEOPLE TAKING PART IN THE STUDY:

If you agree to participate, you will be one of a few thousand people who will complete our online survey during the coming year. You might also be one of up to 200 subjects who will be contacted this year to participate in the interview portion of this study. The study will likely continue for a few years.

PROCEDURES FOR THE STUDY:

If you agree to be in the study, you will do the following things:

First you will complete a 27 item online survey about your informal and extreme learning experiences. The survey will be anonymous. After completing the main survey items, you can stop there or you can continue and respond to a set of 14 additional open-ended questions about your informal learning or teaching experiences with Web technology. . You will have as long as you like to complete these questions and can skip any question in which you do not want to answer. In addition, some of these participants will be asked to participate in online interviews or focus group sessions that will include about a series of questions about their informal learning or teaching with technology. These sessions will last 45 to 60 minutes. They are also optional.

In addition to participating in this study, you can access the Extreme-Learning.org Website and read through the informal learning stories of others or contribute one or more of your own. Such contributions can be anonymous if you so choose.

RISKS OF TAKING PART IN THE STUDY:

While participating in this study, there are several risks.

Given that this is a new and emerging area of research, there might be confusion about what is being asked during this study at times. In addition, some participants may be directly quoted (with their permission) about their experiences. It is conceivable that their heartwarming stories might inspire others to contact you.

To minimize any risks, you can tell the researchers that you feel uncomfortable answering any question.

BENEFITS OF TAKING PART IN THE STUDY:

The benefits to participation that are reasonable to expect are that you might become aware of similar activities that others are engaged in. Such awareness might foster self-satisfaction and enhanced motivation to learn as well as to help the learning of others.

ALTERNATIVES TO TAKING PART IN THE STUDY:

Alternatives to participating in this study, include recommending other individuals who might fit the goals and intentions of this study or Websites that we might investigate.

CONFIDENTIALITY

Efforts will be made to keep your personal information confidential. We cannot guarantee absolute confidentiality. Your personal information may be disclosed if required by law. Your identity will be held in confidence in reports in which the study may be published and databases in which the results may be stored, unless you approve us to quote you in any resulting publication. Access to any recorded online interviews or email transcripts will be accessible to the research team only and will be stored in a secure, password protected server. They will only be used for educational purposes and will be destroyed on April 30, 2015.

Organizations that may inspect and/or copy your research records for quality assurance and data analysis include groups such as the study investigator and his/her research associates, the Indiana University Institutional Review Board or its designees, and (as allowed by law) state or federal agencies, specifically the Office for Human Research Protections (OHRP).

In addition, as indicated, you can decide to contribute a unique learning story to the Extreme-learning.org Website. Such contributions can be anonymous if you so choose. You can also provide your email contact information at the end of the survey should you want a copy of our final report.

PAYMENT

You will not receive payment for taking part in this study.

CONTACTS FOR QUESTIONS OR PROBLEMS

For questions about the study or a research-related injury, contact the researcher, Dr. Curtis J. Bonk, Professor, Indiana University, School of Education, at 812-856-8353.

For questions about your rights as a research participant or to discuss problems, complaints or concerns about a research study, or to obtain information, or offer input, contact the IU Human Subjects Office at (800) 696-2949.

VOLUNTARY NATURE OF STUDY

Taking part in this study is voluntary. You may choose not to take part or may leave the study at any time. Leaving the study will not result in any penalty or loss of benefits to which you are entitled. Your decision whether or not to participate in this study will not affect your current or future relations with anyone associated with this study, including those at Indiana University.

SUBJECT’S CONSENT

In consideration of all of the above, I give my consent to participate in this research study.

I will be given a copy of this informed consent document to keep for my records. I agree to take part in this study.

Subject’s Printed Name: _____

Subject’s Signature: _____ **Date:** _____

subject)

(must be dated by the

Printed Name of Person Obtaining Consent: _____

Signature of Person Obtaining Consent: _____ **Date:** _____

If the study involves children who will be providing their assent on this consent document, rather than on an assent document, use the following signatures:

Printed Name of Parent: _____

Signature of Parent: _____ **Date:** _____

**NOTE: Printed name lines are optional.

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| <i>For IRB Office Use ONLY</i> |
| IRB Approval Date: |
| Expiration Date: |