# **Informed Consent Form**

Amphibians in Southeast Alaska

IRB # 175438-4 Date Approved: January 26, 2012

# **Description of the Study:**

You are being asked to take part in a study about community knowledge. The goal of this study is to learn what people know about these local frogs and salamanders. You are being asked to take part in this study because you live in Wrangell, AK. Please read this form and ask any questions you may have before you agree to participate in the study.

### Risks and Benefits of Being in the Study:

We believe that participation in this study puts you at minimal risk and provides minimal discomfort. We do not expect you to share information that you are not comfortable or permitted to give us. This study does not have anything meant to hurt you or make you feel bad. If you do feel bad in any way you can stop being part of the study at anytime. Nothing bad will happen to you if you stop being in the study. To stop being in the study, do not fill out the survey. Questions can be asked of the researcher at any time during the study.

We do not promise that you will get any benefit from helping with this study. This study may help researchers to better understand frogs and salamanders. The work may promote greater use of local knowledge in science.

## Confidentiality:

The data from this study may be used in reports, presentations, and publications. You will not be identified unless you choose to be. Your responses will be separated from your contact information. Contact information will NOT be made available to the public when reporting our results. You should be aware that our research must comply with state and federal laws. There are limitations to the confidentiality that can be granted to you. If you identify criminal wrongdoing beyond the scope of this project or threats to human life these may be reported.

#### **Voluntary Nature of the Study:**

Your decision to take part in the study is voluntary. You are free to choose not to take part in the study. You may also stop taking part at any time without any penalty. If you decide to stop participating in the study the information gathered will be destroyed.

## **Contacts and Questions:**

If you have questions ask us. If you have questions later, you can have your parent/guardian call or email the researcher or Faculty Sponsor:

Joshua Ream (Researcher) William Schneider (Faculty Sponsor)

(814) 883-6629 (907) 474-6672

jtream@alaska.edu wsschneider@alaska.edu

If you have questions or concerns about your rights as a research subject, please contact the Research Coordinator in the Office of Research Integrity. They can be reached at 474-7800 (Fairbanks area) or 1-866-876-7800 (outside the Fairbanks area) or fyirb@uaf.edu.

#### **Statement of Consent:**

I understand the procedures described above and I am at least 18 years old. My questions have been answered to my satisfaction, and I agree to participate in this study. I have been provided a copy of this form. By filling out and returning the attached survey, I am indicating my consent to participate in this study.

Jacker J. Kem		
	01/11/2012	
Signature of Person Obtaining Consent	 Date	