

October 16, 2015

Dear Parent or Guardian:

My name is Chelsea VanderWoude and I am a graduate student at Southern Illinois University (SIU) at Carbondale. I am sending this letter because I would like to invite your child to participate in a special research project I will be conducting at Unity Point. In this project, I will be collecting information regarding students' experiences with bullying and the stress it might cause them.

If you choose to let your child participate in the study, they will answer a packet of questionnaires at school. Before doing so, I will read aloud a description of the project and will provide your child with an assent form if they wish to continue. With your permission, I will ask your child to complete six measures that will ask them about their experiences with bullying, stress, emotions, social support, and basic demographic information. These forms will be given during non-academic times (study hall or recess) and should take no longer than 30 minutes to complete.

Your child's participation in this study is voluntary and **will not** affect his/her grades in any way. Your child may skip any questions that make him/her feel uncomfortable or quit this study at any time. A potential risk for being involved in the study is that your child may feel distressed while answering items on the questionnaires. At any time during the study, your child can leave the room and end their participation. Additionally, if your child becomes too upset, a graduate student in the Clinical Psychology program at SIU will be available to provide crisis counseling should it be necessary.

Data obtained from this study will be locked and secured in a room within the Life Sciences II building at Southern Illinois University at Carbondale. All of the information collected from your child is confidential. This means that their name will not be included on any of the questionnaires. In addition, these questionnaires will be coded and kept separately from all consent and assent forms. The results of the self-report forms will be maintained by me, Chelsea VanderWoude (student investigator) and my faculty advisor, Dr. Mary Louise Cashel. If you have any questions, you may contact me at 296-352-3818. You may also contact Dr. Cashel, Associate Professor of Psychology at SIU, at 618-453-3553.

To thank parents who participate, we will be conducting a parent workshop at your child's school on the implications of bullying and how to address it. To thank the children that participate, we will provide each participant with a small token of appreciation. Students can also choose to be entered into a raffle for a gift card instead. Additionally, a summary of the aggregated bullying data will be provided to thank the school for allowing the researchers to conduct the study.

This project has been reviewed and approved by the SIUC Human Subjects Committee and by Dr. Lori James-Gross, Superintendent of Unity Point School. Questions concerning your rights as a participant in this research may be addressed to the Committee Chairperson, Office of Sponsored Projects Administration, Southern Illinois University, Carbondale, IL 62901-4709. Phone (618) 453-4533, E-mail [siuhsc@siu.edu](mailto:siuhsc@siu.edu).

Please have your child return this form to his/her teacher by October 30<sup>th</sup>, 2015 or email it to [Chelsea.k.vanderwoude@siu.edu](mailto:Chelsea.k.vanderwoude@siu.edu).

I thank you for your time and hope to meet with your child soon.

Sincerely yours,

Chelsea VanderWoude, B.S.

**Parent Consent Form**

I give permission for my child, \_\_\_\_\_, to participate in the Bullying Stress Project. I understand that my child will be asked to complete six empirically supported assessments, asking questions about his/her experiences with bullying, stress, emotions, social support, and basic demographic information. I understand that while participating in the study, my child may become distressed while answer questions about his/her experiences with bullying and that he/she can quit the study at any point in time. I understand that my child’s name will be kept separate from his/her name and any other personally identifying information obtained through the study.

I understand that a parent workshop will be conducted at my child’s school following the completion of the study. I also understand that a summary of the data collected in this study regarding bullying will be provided to thank the school for allowing the researchers to conduct the study.

I understand that total time for participation in this project should require about 30 minutes for my child. I have been told that either I or my child may choose not to participate at any time without negative consequences. I understand that this project was designed to study the stress of bullying. I also know that I can contact the project directors, Chelsea VanderWoude at (269-352-3818), or Dr. Mary Louise Cashel, at (618-453-3553) if I have any questions.

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Signature

\_\_\_\_\_  
Date