UVA IRB-SBS #5218

Informed Consent Agreement

Please read this consent agreement carefully before you decide to participate in the study.

Purpose of the research study: The purpose of the study is to develop a multimedia, multicomponent pedagogical approach designed to help teacher candidates acquire knowledge about and implement evidence-based classroom management practices. We seek your input to learn how instructors are currently teaching, supervising teacher candidates.

What you will do in the study: You will be assigned to one of three conditions. One condition requires travel to Charlottesville condition on (January 10th, 2025). The other two require work from home. You will watch a sample teacher video and give the teacher feedback as if they were your trainee. This will take between 1-3 hours. You will then receive professional development totaling approximately 6 hours. You will then give the sample teacher feedback again using what you learn. This will take between 1-3 hours.

Then we will ask you to reflect and document on how much time you spent crafting your feedback and other methods you would use in your existing role.

Time required: Your overall time will be approximately 8-12 hours. This will be more for those assigned to travel to Charlottesville.

Risks: The interview data in this study will be de-identified; thus, there are no anticipated risks in this study.

Benefits: There are no direct benefits to you for participating in this research study. The study may help the research team understand how multimedia vignettes, video analysis, and feedback and coaching help teacher candidates implement various evidence-based practices.

Confidentiality: The information that you give in the study will be handled confidentially. Your information will be assigned a code number. The list connecting your name to this code will be kept in a locked file in an office in Bavaro Hall at University of Virginia. When the study is completed and the data have been analyzed, this list will be destroyed. Your name and the name of your university will not be used in any report.

Voluntary participation: Your participation in the study is completely voluntary. You may elect not to participate without any penalty or loss of benefits to which you would otherwise be entitled. If you participate at first, but later discontinue participation, you will not be subject to any penalty or loss of benefits. You are free to not answer certain survey questions without penalty or loss of benefits.

Right to withdraw from the study: You have the right to withdraw from the study at any time without penalty.

Project Title: How Do University Faculty Provide Feedback to Teachers?

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How to withdraw from the study: If you want to withdraw from the study, please notify Dr. Michael Kennedy at University of Virginia at (434) 924-0827/mjk3p@virginia.edu. There is no penalty for withdrawing. You will still receive full payment for the study. If you would like to withdraw after your interviews have been conducted, please contact Michael Kennedy.

Payment: You will receive a \$500 check for participating in this study. You will need to provide your social security number to be paid. Recently, UVA has moved to a new research participant payment system, PaymentWorks. You will be required to register your own payment information. Information about the system can be found here: https://procurement.virginia.edu/paymentworks-resources

Using data beyond this study: Data will not be used beyond this study.

If you have questions about the study, contact:

Michael Kennedy, Professor Department of Curriculum, Instruction, and Special Education 327 Bavaro Hall University of Virginia, Charlottesville, VA 22903. Telephone: (434) 924-0827 Email address: <u>mjk3p@virginia,edu</u>

If you have questions about your rights in the study, contact:

Tonya R. Moon, Ph.D. Chair, Institutional Review Board for the Social and Behavioral Sciences One Morton Dr Suite 500 University of Virginia, P.O. Box 800392 Charlottesville, VA 22908-0392 Telephone: (434) 924-5999 Email: <u>irbsbshelp@virginia.edu</u> Website: www.virginia.edu/vpr/irb/sbs

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Agreement:

I agree to participate in the research study described above.

Print Name:	Date:	

Signature: _____

You will receive a copy of this form for your records.