

**UNIVERSITY OF TENNESSEE
INSTITUTE FOR ASSESSMENT AND EVALUATION**

**INFORMED CONSENT STATEMENT FOR: EXTERNAL STAKEHOLDERS
FOOD SAFETY EDUCATION PROJECT**

A. INTRODUCTION You are being invited to voluntarily participate in a survey of external stakeholders for the evaluation of the Food Safety Education project in your school system. The purpose of this evaluation is to assess the effectiveness of the Food Safety Education program serving the 7th grade students. The perspectives of the program's participants and stakeholders are elements of the annual evaluation.

B. INFORMATION ABOUT PARTICIPANTS' INVOLVEMENT IN THE STUDY Your involvement in the study would include participating in a 25 minutes survey during the last two weeks of April under the following circumstances:

1. The school system has approved the evaluation, and will invite your voluntary participation.
2. The survey will be scheduled/conducted at your school during a time suitable to all participants.
3. An evaluation team from the University of Tennessee (UT) will conduct the survey.

C. RISKS There is minimal risk to your participation in this evaluation.

D. BENEFITS Benefits to your participation include the collection of information that could be used to improve the program. Participants may also gain a better understanding of the program.

E. CONFIDENTIALITY Confidentiality of survey results (participant comments) will be maintained. Participant comments noted will not be attributed to specific individuals. Data will be stored securely and only made available to evaluation team at the University of Tennessee. Selected survey comments made may be included in the evaluation report, but not attributed to individuals.

F. CONTACT INFORMATION If you have questions at any time about the study or the procedures, (or you experience adverse effects as a result of participating in this study,) you may contact the evaluation project manager, Dr. Gary Skolits, at the UT Institute for Assessment and Evaluation; Claxton Complex A513; Knoxville; TN 37996-3400, or call (865) 974-2777. If you have questions about your rights as a participant, contact [Research Compliance Services](#) of the Office of Research at (865) 974-3466.

G. PARTICIPATION Your participation in this study is voluntary; you may decline to participate without penalty. If you decide to participate, you may withdraw from the study at anytime without penalty and without loss of benefits to which you are otherwise entitled.

CONSENT

I have read the above information. I have received a copy of this form. I agree to participate in this study.

Participant's signature _____ Date _____

Investigator's signature _____ Date _____
