



**New York University**  
A private university in the public service

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**Parent's or Guardian's Informed Permission Form**  
**PLEASE READ CAREFULLY BEFORE SIGNING**

*A first-hand experience with laboratory procedures is an important part of many courses in psychology. At NYU, we take advantage of our faculty's active research programs to give students that experience. Students in most courses participate in carefully supervised studies, thus gaining otherwise unobtainable experience with original research in psychology. We have both department and university-wide committees that approve studies for our students. These committees are very exacting in enforcing high ethical standards. Each of the research projects contains safeguards designed to protect the rights and welfare of the students who participate. All records are confidential, so the privacy of the student's data is protected.*

**The Study:** Your child, \_\_\_\_\_, is invited to take part in a study named Picture Gallery. It is being conducted by Miya Kitahara who is the principal investigator. She can be reached at mek257@nyu.edu; 212-998-7834; 6 Washington Place, 7<sup>th</sup> Floor, New York, NY 10003. The faculty sponsor of this work is Prof. Yaacov Trope, who can be reached at yaacov.trope@nyu.edu, 212-998-3897.

**Its Purpose:** The study is designed to learn more about how mental representations shape and determine people's social judgment.

**Its Procedures:** If you give permission for your child to be in this study, s/he will be asked to do the following: complete a series of paper-and-pencil questionnaires, a computer task in which s/he will make computer-based decisions, and paper-and-pencil personality measures. Participation will take about 1 hour, for which your child will receive 1 hour of credit or \$10 (your child must choose one or the other).

**Its Risks:** There are no known risks associated with this study.

**Its Payments or Other Incentives:** If your child chooses to receive payment, your child will be paid \$10 for completing this study. If s/he withdraws before the end of the study no payment will be given. As an incentive to perform well on the computer task, participants with the top ten scores will earn \$20 each at the conclusion of all sessions of the study. If your child earns one of the top ten scores on the computer task, s/he will receive \$20.

**Its Benefits:** Although your child will receive no direct benefits, participation in this study may make your child more aware of how knowledge is discovered in psychology and help the investigator better understand the psychological processes underlying evaluations.

**Consent:** Participation in this study is completely voluntary. Non-participation or withdrawal will not affect your child's grade or academic standing in any way. Further, once participating, he or she may withdraw at any time and still receive any credit offered in exchange for that participation.

**Privacy:** Confidentiality of your child's research records will be strictly maintained by the assignment of codes. Materials will be kept in a locked laboratory room accessible only by the researchers. There will be one secure document connecting your child's participant code to his/her name and e-mail address. This document will be kept secure and separated from the coded materials. After the top performers have been notified of their award, this sheet will be promptly destroyed, erasing all connection between your child and his/her responses. All remaining materials will be maintained for 5 years, and then be shredded, as recommended by the American Psychological Association.

**Debriefing:** On completing the study your child will receive a thorough written explanation of it that you may ask to see.

*The information above has satisfied me such that I agree that my child may participate in your study. If I have any additional questions or want to report a problem, I may reach the researcher, Miya Kitahara, or her Faculty Sponsor, Prof. Yaacov Trope, at their contacts provided above. For questions about my child's rights as a research participant, I may contact the University Committee on Activities Involving Human Subjects (UCAIHS), Office of Sponsored Programs, NYU, (212) 998-2121. I have received a copy of this permission document to keep.*

Permission Granted for my Child's Participation

\_\_\_\_\_  
Parent's or Guardian's Signature

\_\_\_\_\_  
Date