

INFORMED CONSENT FOR RESEARCH PARTICIPATION

I request your participation in a research project that seeks to examine the role of Synergetic Play Therapy to decrease symptoms as reported by the Pediatric Symptom Checklist. This one-page questionnaire should take approximately five minutes to complete. This project is being undertaken by Dr. Sarah Jarvie. It is conducted under the auspices of the Department of Counseling at Colorado Christian University and the Synergetic Play Therapy Institute.

All data you will contribute to this study will be anonymous and untraceable. In no way will your child's therapeutic services be affected by the data you return to the investigator. Only averages and other descriptive statistics will be reported in any publication, i.e., no individual results will be reported. Results will be available to you when the study is finished. You may contact me at the telephone number or email address below.

You may want to complete this survey at a time and in a place where you have some privacy. Completion of these measures should entail no greater risk than normally encountered in everyday life. Your participation in this study is voluntary and there is no penalty for refusal to participate. You are free to withdraw your consent and discontinue participation at any time. If you complete and return this questionnaire, your consent will be assumed.

Though others associated with the primary investigator may assist in the distribution and collection of the responses, only your therapist and the primary investigator, Dr. Sarah Jarvie, will be viewing your questionnaire responses. If you have any questions or concerns in regard to this project, its results, or how you felt after taking the measures, you can contact Dr. Sarah Jarvie (see contact information below). If you have personal concerns that arise from responding to any of the questionnaires, please contact a qualified mental health provider in your area. Please also feel free to request a debriefing from the principle investigator for any reason.

Principle Investigator: Dr. Sarah Jarvie

Email: sjarvie@ccu.edu

Phone: 719-867-5804

Name: _____

Date: _____

Signature: _____

Client ID for Study: _____
IRB Approval #1038