

## CERTIFICATE OF INFORMED CONSENT

Name of Program/Study: Mentoring to Recruit and Retain Students of Color in  
Secondary Education Programs

Name of Researcher: Miriam M. Witmer, Instructor  
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My signature below certifies that the project in which I am about to participate has been explained to me and that all of my questions regarding this study have been answered satisfactorily. I voluntarily agree to participate in this program/study and understand that I may withdraw my permission, or refuse to answer any question, at any time without penalty.

Although my name appears on this form, I understand that this form will not be associated with my responses and that it will be kept in a locked file separate from my survey responses and will be destroyed, along with the data forms, when the time required for retention has expired (5 years). I also understand that neither my name, nor my specific responses, will be reported and that no one other than the researcher will see my completed questionnaires.

I realize that I have the right to inquire about the results of this study by contacting the above-named researcher and that I will not be personally identified if the results of this study are published. I do agree to allow my photograph and/or video taped interview to be used by the researchers for publication and educational purposes.

\_\_\_\_\_  
Signature- student

\_\_\_\_\_  
Please print your name

\_\_\_\_\_  
Signature- parent\*

\_\_\_\_\_  
Date

Please return this signed consent form and the completed mentee contact information form in the enclosed self-addressed envelope ASAP so we can make a match for your child. Thank you.