Innovative Hierarchy Model Integrating Research, Education, and Peer Mentoring

CHILD ASSENT FORM

I,______________________, agree to be in a study to find ways to help children improve their understanding of science and mathematics. I will have to do special work, participate in special activities, and register for required courses. I will sometimes have to help other students my age or younger to use some of the tools taught to me through this program. I can decide to stop being in the study at any time, and it will not affect my ability to remain at Louisiana State University.

Minor’s Signature______________________ Age____ Date__________

Witness*______________________Date__________

(Parent or Guardian)

* (N.B. Witness must be present for the assent process, not just the signature by the minor.)