PARENTAL/GUARDIAN INFORMED CONSENT FORM

Read the statements carefully. Check the box behind it to indicate you have understood.

Signed forms can be submitted before the interview via e-mail or before the start of the interview in person. No interview can begin without a signed informed consent form from parents or guardians for any participant younger than 18.

I , the undersigned, hereby confirm that…

1	I have read and understood the information about the study. I have had the opportunity to consider the information and my teenager's participation and to ask questions which have been answered to my satisfaction.	
2	I understand that my teenager's participation in this research is entirely voluntary. They may skip any question they do not want to answer or stop participating at any time during the interview without needing to provide a reason.	
3	I understand that choosing not to participate or stopping participation will not affect my teenager's involvement in any educational activities or evaluations at their school, library, or youth organization, or with Ghent University.	
4	I understand that if my teenager completes the interview but later wishes to withdraw their data, I may request this within 7 days of completion, without needing to give a reason. A simple email, providing either the interview day and time or their pseudonym, is enough.	
5	I understand my teenager's data will be kept confidential and that their name will not be recorded with their data.	
6	I understand that the data collected will be handled according to the law and the information provided in the Information Letter.	
7	I understand that my and my teenager's contact information is stored separately from their interview data, only used for contacting me about the study, and will be deleted after the data collection period has ended.	
8	I understand my teenager will receive a book voucher as a token of appreciation for their time and commitment, but that they or I will not receive financial compensation otherwise. I understand our reasonable, regional travel costs will be reimbursed.	
9	I understand my teenager can request a copy of their interview transcript to verify the accuracy of the content and to provide any additional clarification. I understand that they would need to provide any corrections, additions, or deletions within 7 days after receiving the transcript.	
10	I give permission for the researcher to record the interview (audio only; for transcription).	
11	I give permission for the researcher to publish the study results in scientific journals, conference presentations, and public workshops and lectures, for example. If direct quotes are included, I understand that the researcher will do everything they reasonably can to protect my teenager's identity to ensure that they cannot be directly identified.	
12	I give my consent for my teenager to participate.	

☐ I wish to be contacted if my teenager chooses to receive a copy of their transcript for verification.

☐ I wish to receive a summary of the study results. I understand the researcher will retain contact information until the summary has been sent.

Date and time of the interview:

Your teenager's assigned pseudonym (if known):

If you would like to receive notification your teen has requested a copy of the interview transcript for verification or if you would like to receive a summary of the results, please provide an email address below:

Parent(s) / Guardian(s):

Name	*Date*	*Signature*

The person requesting the consent:

Name	*Date*	*Signature*
Janieke Koning		

The person requesting consent is Janieke Koning, the researcher, for her project *Reading Mentors*.

<u>If you have any questions about the study or participation, feel free to contact:</u>

Janieke Koning
Email: readingmentors@ugent.be
Address: Campus Boekentoren, Blandijn, Blandijnberg 2, office 130.005, 9000, Gent

Prof. Dr. Elly McCausland (the supervisor)
Email: elly.mccausland@ugent.be
Address: Campus Boekentoren, Blandijn, Blandijnberg 2, 130.015, 9000, Gent

Data Protection Officer of Ghent University
Mrs. Hanne Elsen
Tel: +32 9 264 95 17
Email: privacy@ugent.be
Address: Campus Ufo, Rectoraat 2, Sint-Pietersnieuwstraat 25, 9000 Gent