

**Letter of Invitation to Participate in Study**

Study Title:

Dear \_\_\_,

My name is (insert). I am a (professor/doctoral candidate/graduate student) in the \_\_\_\_\_

Department at the Lincoln University of Pennsylvania (LUPA). *(If appropriate)* I am conducting a research study as part of the requirements of my degree in \_\_\_\_\_, and I would like to invite you to participate. *(If appropriate)* This study is sponsored *(or)* funded by \_\_\_\_\_.

I am studying (describe purpose). If you decide (to allow your child) to participate, you (your

child) will be asked to (describe procedures, e.g., complete some surveys about \_\_\_\_\_ *(or)*

meet with me for an interview about \_\_\_\_\_\_ *(or)* participate in a group discussion about \_\_\_\_\_\_.

In particular, you will be asked questions about *(or)* we will discuss (insert topics).

The meeting will take place at \_\_\_\_\_\_\_ *(or)* a mutually agreed upon time and place, and should last about\_\_\_ minutes. *(If appropriate)* The session *(or)* interview will be audio *(or)* videotaped so that I can accurately reflect on what is discussed. The tapes will only be reviewed by members of the research team who will transcribe and analyze them. They will then be destroyed.

*(If appropriate)* You may feel uncomfortable answering some of the questions. You do not have to answer any questions that you do not wish to. Although you probably won’t benefit directly from participating in this study, we hope that others in the community/society in general will benefit by \_\_\_\_\_\_.

Participation is confidential. Study information will be kept in a secure location at the Lincoln University of Pennsylvania (LUPA). The results of the study may be published or presented at professional meetings, but your identity will not be revealed. *(or)* Participation is anonymous, which means that no one (not even the research team) will know what your answers are. So, please do not write your name or other identifying information on any of the study materials.

*(for focus groups)* Others in the group will hear what you say, and it is possible that they could tell someone else. Because we will be talking in a group, we cannot promise that what you say will remain completely private, but we will ask that you and all other group members respect the privacy of everyone in the group.

*(If applicable)* You will receive \_\_\_ to reimburse you for your time and travel expenses (insert when). If you withdraw from the study prior to the conclusion, you will still be reimbursed the same amount/your reimbursement will be pro-rated (describe how).

Taking part in the study is your decision. You do not have to be in this study if you do not want to. You may also quit being in the study at any time or decide not to answer any question you are not comfortable answering. *(If LUPA students involved)* Participation, non-participation or

withdrawal will not affect your grades in any way. If you begin the study and later decide to

withdraw, you will still receive research credit *(or)* there are other research credit opportunities

available to satisfy your research requirement.

We will be happy to answer any questions you have about the study. You may contact me at

(insert phone number and e-mail address) or my faculty advisor, (insert name, phone number, and e-mail address) if you have study related questions or problems.

If you have any questions about your rights as a research participant, you may contact the chairperson, Dr. Susan Safford, of the Human Subjects Committee and Institutional Review Board at the Lincoln University of Pennsylvania at 484-365-7512.

Thank you for your consideration. If you would like to participate, please (explain what they should do, e.g., open the attached survey packet and begin completing the study materials.

When you are done, please (insert instructions about what to do with completed instruments).

*(or)* please contact me at the number listed below to discuss participating. *(or)* Sign the attached form and return it to \_\_\_\_\_\_\_\_. *(or)* I will call you within the next week to see whether you are willing to participate.

Best regards,

(Signature)

(Name)

(Address)

(Phone number)

(E-mail address)