New York University
Faculty of Arts and Science
Department of Psychology
6 Washington Place, Room 601
New York, NY 10003-6634
Telephone: (212) 998-7874

Parental/Guardian Permission Form for Department Pool Participants Earning Credit
IRB-FY2020-3853

Your child, ______________________, is invited to take part in a study named The Influence of Sense of Belonging as a Factor of Romantic Relationship Satisfaction. The study is designed to learn more different factors that attribute to feelings in a romantic relationship. The research is being conducted by Arielle Phillips who is a graduate student of GSAS. The faculty sponsor of this work is Dr. Joshua Aronson in the NYU Department of Applied Psychology.

If you permit participation in this study, your child will be asked to complete a battery of surveys based on experiences in their current relationship. Participation will take about 30 minutes, and will earn 0.5 credit for laboratory participation towards the course research requirement. If your child withdraws from the study, your child will receive credit for the time completed. Your child can fulfill the course requirement in other ways besides participating in research.

There are no known risks associated with your child’s participation in this research beyond those of everyday life. Although your child will receive no direct benefits for participation in this study, it may make your child more aware of how knowledge is discovered in psychology and help the investigator better understand different factors that attribute to feelings in a romantic relationship.

Taking part in this study is voluntary. Not taking part or withdrawing from the study will not affect your child’s grades or academic standing in any way. Your child has the right to skip or not answer any questions he/she prefers not to answer. When your child completes the study, a thorough verbal and written explanation of it will be provided.

Confidentiality of your child’s research records will be maintained by keeping all data in a password protected account. This account will only be accessed by the PI and Co-Investigators. The information that your child provides during this research will be kept confidential. We will remove any information that can identify your child once we have granted your child the credits. Information not containing identifiers may be used in future research or shared with other researchers without additional consent.

If there is anything about the study or taking part in it that is unclear or that you do not understand, or if you have questions or wish to report a research-related problem, you may contact the principal investigator, Arielle Phillips, at aep448@nyu.edu, or the faculty sponsor, Dr. Joshua Aronson, at (212) 998-5543, joshua.aronson@nyu.edu, 239 Greene Street 537F, New York, NY 10003-6677.

For questions about your child’s rights as a research participant, you may contact the University Committee on Activities Involving Human Subjects (UCAIHS/IRB), New York University, (212) 998-4808 or ask.humansubjects@nyu.edu, 665 Broadway, Suite 804, New York, NY 10012.

You have received a copy of this permission document to keep.

Permission

__________________________________________  _________________________
Parent’s Signature                                Date