

March 1, 2006

Dear Teacher,

Your State Department of Education is part of a group of 18 states that is working with Jerry Tindal, Ph.D. from the University of Oregon, to study alternate assessments. They want to evaluate the content of alternate assessments and how well they function as measures of achievement. We are including in this study a sample of students who are eligible for taking the alternate assessment.

This study is important because it allows states to develop and implement good alternate assessments. Although you or your students may not benefit directly from participation, you are helping us understand how to find out how well students are performing. The results of the study may be published in an education journal.

The study begins around the middle of March 2006 and will be complete by the middle of June 2006. Very little instructional time would be taken by having your student participate in this study. A total of 2-3 hours would be used to: (a) gather the Individualized Education Program (IEP) with description of mathematics goals, (b) complete a Language Perception Survey (c) complete an Instructional Program and Observation Form of the student in the classroom (d) collect student Work Samples in mathematics, and (e) administer Mathematics and Reading Performance Assessments. We will record grade, gender, ethnicity, age, participation in specialized programs such as special education, primary language, date of birth, disability, and areas of assistance identified on IEPs. Any information collected from your student will be transcribed on a form to maintain the confidentiality of your student.

All forms will be pre-coded with an identification number that is aligned with the student's name. The master file that associates this identification and name will be kept in a separate location (both electronically and physically) so that it will not be possible to relate student data with names. Otherwise, all identifying student information will be removed from any forms before using it for research purposes. If you do <u>not</u> want to participate or want to withdraw at any time, your decision will not affect you or others in your building or district.

There are few risks in this study. The assessments being used are well accepted as good measures of student routines and skills. All data will use a coding system so no one can identify individuals with their outcomes.

A report will be sent to you within six months (December 2006) of the end of the study after data analysis and report writing are complete.

If you have any questions, please call Jerry Tindal (541) 346-1640. Or write to him at: 170 Education, University of Oregon, Eugene, Oregon 97403. If you have questions about your participation in this research project, you may call the Human Subjects Compliance Office at the University of Oregon, Suite 105 - Riverfront Research Park (541-346-2510). Please retain a copy of this letter/form for your records.

Your signature indicates you have read and understand the information provided above, that you willingly agree to participate, that you may withdraw your consent at any time and discontinue participation without penalty, that you will you will retain a copy of this form, and that you are not waiving any legal claims or rights.

Print Name	State
Signature	Date



March 1, 2006

Dear Parent,

Your State Department of Education is part of a group of 18 states that is working with Jerry Tindal, Ph.D. from the University of Oregon, to study alternate assessments. They want to evaluate the content of alternate assessments and how well they function as measures of achievement. We are including in this study a sample of students who are eligible for taking the alternate assessment.

This study is important because it allows states to develop and implement good alternate assessments. Your child may benefit by participating because their teacher is collecting useful information. If your child does not benefit directly, you can at least be certain that you are helping us understand how to better assess performance on state tests. The results of the study may be published in an education journal.

The study begins around the middle of March 2006 and will be complete by the middle of June 2006. Very little instructional time would be taken by having your child participate in this study. A total of 1-2 hours would be used to take a short Mathematics and Reading Performance Assessment. In addition, your student's teacher will be: (a) gathering the Individualized Education Program (IEP) with description of mathematics goals, (b) completing a Language Perception Survey (c) completing an Instructional Program and Observation Form of your child in the classroom, and (d) collecting work samples in mathematics. We will record grade, gender, ethnicity, age, participation in specialized programs such as special education, primary language, date of birth, disability, and areas of assistance identified on IEPs. Any information collected from your child will be transcribed on a form to maintain the confidentiality of your child.

All forms will be pre-coded with an identification number that is aligned with your child's name. The master file that associates this identification and name will be kept in a separate location (both electronically and physically) so that it will not be possible to relate your child's data with his or her name. Otherwise, all identifying information will be removed from any forms before using it for research purposes. If you do <u>not</u> want to participate or want to withdraw at any time, your decision will not affect your child. No change in status will occur with the teacher or school.

There are few risks in this study. The assessments being used are well accepted as good measures of student routines and skills. All data will use a coding system so no one can identify individual students with outcomes.

A report would be sent to your teacher within six months (December 2006) of the end of the study after data analysis and report writing are complete.

If you have any questions, please call Jerry Tindal (541) 346-1640. Or write to him at: 170 Education, University of Oregon, Eugene, Oregon 97403. If you have further questions about your child's participation in this research project, you may call the Human Subjects Compliance Office at the University of Oregon, Suite 105 - Riverfront Research Park (541-346-2510). Please retain a copy of this letter/form for your records.

Your signature indicates you have read and understand the information provided above, that you willingly agree to participate, that you may withdraw your consent at any time and discontinue participation without penalty, that you give your consent to allow your child: _______ to participate in the study, that you will receive a copy of this form, and that you are not waiving any legal claims or rights. Please return this signed form to your child's teacher in the stamped envelope that was enclosed with this form.

Student Name	
Parent/Legal Guardian (Print Name)	
Signature of Parent/Legal Guardian	Date