**E.2 Consent Form for Faculty**

**Participation in this focus group is entirely voluntary.** You are free to refuse to be in the project at any time, and your refusal will not influence current or future relationships with [Name of College].

[Name of College] is committed to doing all we can to help students be successful. The purpose of conducting focus groups with faculty is to learn about your perspective on college policies and practices that influence student success, your experiences at this college, and your thoughts about what we are doing well and what we need to do to improve student success.

The information gathered in this focus group will be summarized by the focus group staff, and the college administration will receive a summary of the discussion. Participant comments may recorded and/or video-recorded for the sole purpose of maintaining an accurate record of the discussion that will be a reference for any reports derived from the discussion. Information derived from this focus group discussion may be used in publications and presentations to further the educational goals of this community college. All written publications and reports will exclude any information that will make it possible to identify individual participants as project participants.

**Faculty members who participate in the project will be interviewed in a 90-minute focus group and will be asked to complete a short response sheet.**

 [Name of College] needs a signed consent form for every student participating in this focus group project. **By signing this consent form, you agree to participate in the project.**

The records from this project will be stored securely and kept confidential. Individual participant responses will be kept confidential; however, in the event that a participant indicates a clear, serious, and direct harm to self or others, confidentiality will be broken and necessary information will be reported to a college counselor. Authorized persons from the college have the right to review focus group records and will protect the confidentiality of those records to the extent permitted by law.

If you have any questions about this project, please contact us [Focus Group Coordinator] at [phone] or [e-mail].

You will be given a copy of this information to keep for your records.

**Consent**

I, , a faculty member at ,understand that:

 Name (please print) Institution name

1. **This interview/focus group may be audio recorded and/or video-recorded for the purpose of maintaining an accurate record of the discussion that will be a reference for any reports derived from the discussion;**
2. **The information gathered in this focus group will be summarized by the focus group staff, and the college administration will receive a summary of the discussion; and**
3. **Information derived from this focus group discussion may be used in publications and presentations to further the educational goals of this community college.**

I have read and understand this consent form and agree to voluntarily participate in this project.

 Participant’s Signature Date