

INFORMED CONSENT FORM

CONTACT INFORMATION: For questions regarding this study, please contact Kay Christensen at kayc@stanford.edu or (267) 879-6873. Other members of the research group are Amber Rockwood and Bowen Pan.

RESEARCH DESCRIPTION: Our research group is associated with, but not representative of the views or opinions of, Stanford University's Interaction Design Studio (CS247) course. The following use test is being performed to examine users' interactions with a web-based application that also enables tactile sensation.

The results of this study will be used to improve usability and design of the application and hardware tool. You will receive written instructions on tasks to perform with the application and hardware, and additional instructions for troubleshooting unexpected problems with the hardware. After you use the device, you will be asked for your feedback and opinions on its use. You will also be asked for demographic data to include age, gender, education level, and other data related to user population. This process is expected to take 1 hour.

CONFIDENTIALITY: Data collected during your use test will be reported anonymously, but may be included in our research group's data analysis; analysis and conclusions drawn from our analysis may be reported on our public course website and/or during a public presentation. Your identity will be protected to the extent permitted by law, including the Freedom of Information Act. You may elect to use a pseudonym during the following steps of the use test.

RISK: Users exposed only to the web-based application: any physical risks associated with the use test are similar to those of mild office work. Users also exposed to the hardware tool: mild physical discomfort associated with pinching or minor electrical shocks are possible but not expected. You are free to adjust, move, or remove the hardware tool at any time.

You are free to withdraw from the study at any time.

"I have read the above description of this use test. I have also spoken to the researcher, who answered any questions I had about this project. I acknowledge that I have received a personal copy of this form. I agree to participate in this research and I understand that I may withdraw at any time."

Signature of Participant: _____

Date: _____

Signature of Researcher: _____

Date: _____

RECORDING CONSENT FORM AND RELEASE

For analysis and usability purposes our research group requests certain recordings of your use test. Any recording will occur only with your consent. Recordings will be stored and password-protected on a single local machine. All recordings will be destroyed no longer than three weeks following their collection. Indicate your consent to the following types of recording by signing the appropriate lines below.

AUDIO RECORDING: I understand and consent to the taking and use of audio recordings during my use test. I understand that the information and recording are for research purposes only and will not be shared beyond the research group. I understand that I may request that portions or entireties of audio recording be destroyed after its collection.

Signature: _____

Date: _____

VIDEO RECORDING: I understand and consent to the taking and use of video recordings during my use test. I understand that the information and recording are for research purposes only and will not be shared beyond the research group. I understand that I may request that portions or entireties of video recording be destroyed after its collection.

Signature: _____

Date: _____

PHOTOGRAPHS: I understand and consent to the taking and use of photographs during my use test. I understand that my face and any identifying features will be obscured before being shared outside of the research group. I understand that these photos may be included on the public Interaction Design Studio course website and/or on a visual presentation to members of the public at the end of the course. I understand that any photos shared with the public will be included for the sole purposes of demonstrating user-based design research.

Signature: _____

Date: _____