**Bemidji State University - Department of Psychology**

**Informed Consent Form**

Thank you for volunteering to participate in this study. The purpose of this study is to investigate memory processes. Your participation is voluntary, and you may withdraw at any time without penalty. Although you will not be granted extra credit points unless you complete this study, you have an opportunity to earn extra credit points by participating in another experiment or other means listed in your course syllabus.

The information you give us is confidential. Your name or any identifying information will not be on any information you provide. Because this is a research study, we will not provide you with individual information about your performance. We will, however, discuss the research with you after it is completed by sending you an e-mail. Your participation in this study will consist of viewing a list of words, performing simple math calculations, and completing a memory task*.* The words will be presented for about 2 sec each and the entire list will take about 6 min. The entire experiment should take less than half an hour.

We do not anticipate that you will experience any discomfort as a result of being a participant in this study. However, if you have any such concerns, please feel free to discuss them with the experimenter or any of the people listed below. If you have concerns about the any of the psychological measures used in this study or your own reactions to the stud*y*, the Student Center for Health & Counseling (Birch Hall 1A)at 755-2024 s available for your information and assistance.

I have read this letter and voluntarily agree to participate in this research; I take responsibility for reading the debriefing that will be sent to me via e-mail.

**Signature: \_\_\_ Date:**

**e-mail address (print clearly): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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# Psychology Research

Jim Rafferty ([jrafferty@bemidjistate.edu](mailto:jrafferty@bemidjistate.edu), HS 204, 755-2884)

Student Center for Health & Counseling - Birch Hall 1A, 755-2024)