



STANDARD CONSENT FORM FOR HUMAN PARTICIPANTS IN RESEARCH
UNIVERSITY OF NORTHERN COLORADO

Project Title: *The Power of Dance: How Dance Affects Mental and Emotional Health and Self-Confidence In Young Adults*

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The goal of this thesis research project is to create and direct an original one-day dance workshop to share the mental and emotional benefits of dance with you. It is presumed that you may not otherwise have regular exposure to dance because of socio-economic status and or access at the school level.

You will participate in four dance classes of various genres. Attendance in each class is paramount to your success and it will be documented for research analysis. In addition to this consent form, you will be asked to complete a questionnaire before and after the event. The pre-questionnaire will ask about information regarding dance experience, preferences, self-confidence, and social experiences. The post-questionnaire will ask about experiences and feelings during the dance workshop classes and personal self-confidence and interest in dance at the conclusion of the day.

You will be assigned a participant code that will align with your attendance, questionnaires, and any observational notes the researcher makes throughout the workshop. You will wear a wristband throughout the classes that indicates your involvement in the research. There will be other students taking the classes that are not participating in the research.

Lastly, it is also possible that you will be asked to participate in an interview at the conclusion of the event. The interviews and dance classes may be videotaped to support the notes taken by the researcher. Be assured that the researcher intends to keep the contents of these recordings private, unless you give permission below for their use as an instructional aid or promotional material for future dance workshop events. Your name would never be used.

At the end of the event and when research has concluded, we would be happy to share your data with you at your request. We will take every precaution in order to protect your anonymity. The researcher will be the only person to know the name connected with a participant number and when data is reported, his/her name will not be used. Data collected and analyzed for this study will be kept in a locked cabinet in the home of the researcher and in the advisor's office at the University, which is only accessible by the researcher and the advisor.

Potential risks in this project are minimal. As with any type of physical activity, risks include fatigue, localized muscle soreness, and the potential for strains and sprains of joints of the lower extremity. If you become too fatigued or uncomfortable, you may choose to stop and rest. In the unlikely event of an injury, we will contact appropriate medical authorities. Please let the volunteers know if you have any injuries or disabilities that may affect your participant while in dance class. Extreme care will be taken

to ensure that you are positively critiqued, and that the dance workshop environment is safe and supportive.

Participation is voluntary. You may decide not to participate in this study and if you begin participation you may still decide to stop and withdraw at any time. Your decision will be respected and will not result in loss of benefits to which you are otherwise entitled. Having read the above and having had an opportunity to ask any questions, please sign below if you would like to participate in this research. A copy of this form will be given to you to retain for future reference. If you have any concerns about your selection or treatment as a research participant, please contact Nicole Morse, Office of Research, Kepner Hall, University of Northern Colorado Greeley, CO 80639; 970-351-1910.

Thank you for your commitment to this event, assisting the research, and celebrating the power of dance with us.

Sincerely,
Amber Salo

CONSENT FORM SIGNATURES

Subject's Name Date

Researcher's Name Date

Subject's Signature Date

Researcher's Signature Date

*** Please initial below if you give permission to the researcher to use video footage (interview and dance class material) for instructional and/or promotional purposes,*

Initials

*** Please initial below if you have any physical injuries or disabilities that may affect your participation in dance class.*

Initials