

Dear XXX (Participant),

My name is Avery Smith and I am a Doctoral student in Te Whānau o Ako Pai ki Te Upoko o te Ika a Māui, Faculty of Education at Victoria University of Wellington. I am studying to become a doctor (PhD) of education. I taught primary school in the United States and am interested in learning about how schools work in Aotearoa New Zealand.

You will see me in your class over the next term, helping out and taking notes about what is happening in your classroom. I want to find out what you think about culture and cultural identity. I look forward to what you and your classmates have to teach me.

Your teacher has chosen to be part of this study, and since you are a member of [her/his] class I am inviting you to take part in this research as well. You are able to decide whether you want to be part of this study or not. If you decide to participate, thank you. I will send home some information for your parents to look over and sign so that you can take part in this study. I will also ask you to sign a form agreeing to be part of my study. If you decide not to participate, thank you for considering this request.

This research has been approved by the Victoria University of Wellington Human Ethics Committee [27440].

How can you help?

I will come to your classroom every week during term _ _ 2019. If you agree to take part in this research, I will do the following:

- I will sit in class and listen to how you, your classmates, and teacher think about culture and cultural identity.
- I may ask you questions that clarify my understanding of something you said or did in class.
- You can stop being part of the research at any time during the term and the information I have about you will be destroyed.

What will happen to the information you give?

This research is confidential¹ so I will not use your real name in the research. My notes will only be read by me and my supervisors. This information will be kept securely and destroyed in December 2024.

¹ **Confidentiality** will be preserved except where you disclose something that causes me to be concerned about a risk of harm to yourself and/or others.

If you accept this invitation, what are your rights?

You do not have to agree to be part of this research, it is your choice. If you do decide to be part of this research you can:

- choose not to answer any question;
- leave the study before the end of term___ 2019;
- ask any questions about the study at any time;

If you have any questions concerning the research, please feel free to ask me for further information or you, your teacher or parents can also contact my supervisors:

Student:	Supervisor:	Supervisor:
Name: Avery Smith	Name: Dr. Joanna Kidman	Name: Dr. Adreanne Ormond
University email address:	Role: Associate Professor,	Role: Senior Lecturer,
avery.smith@vuw.ac.nz		School: School of Education
		Phone: 4 463 9750
		Adreanne.Ormond@vuw.ac.nz

Human Ethics Committee information

If you have any concerns about the ethical conduct of the research you may contact the Victoria University HEC Convenor: Dr Judith Loveridge. Email hec@vuw.ac.nz or telephone +64-4-463 6028.



The Role of Schools in Shaping Pākehā Teachers Views of Culture and Cultural identity CONSENT FORM FOR STUDENT

This consent form will be held for five years.

Researcher: Avery Smith, School of Education, Victoria University of Wellington.

- I have read the Information Sheet and the project has been explained to me. My questions have been answered to my satisfaction. I understand that I can ask further questions at any time.
- I agree to take part in the study.

I understand that:

- I may withdraw from this study at any point before the end of term 4, 2019. Any information notes that the researcher has about me before I withdraw will be kept, but no further notes will be taken.
- The identifiable information I have provided will be destroyed in December 2024.
- Any information I provide will be kept confidential to the researcher and the supervisors.
- I understand that the results will be used for a PhD dissertation and/or academic publications and/or presented at conferences.
- My name will not be used in reports, nor will any information that would identify me.

Signature of participant:	
Name of participant:	
Date:	