**General Protocol for Contacting Expert Participants for COMN 4729 Assignments**

Overview:

When students contact participants for inclusion in any assignment, they should identify themselves as York Communication Studies students.

The student should say what the interview is for: the student will say that it is for a class assignment and that there is a possibility of later publication or broadcast.

Students must be certain that the source is aware of, and reasonably able to judge, the possible consequences of being quoted or otherwise represented in the news media. If there is a question about this (for instance, when children or adults with mental disabilities are involved), students should consult with their instructors and proceed on a case-by-case basis. Sources should also be informed that they may be contacted by an instructor or another student for fact-checking purposes.

In the case of written or audio recordings, a consent form (see attached) must be signed or oral consent must be given and included on any recordings of interviews.

If a student interviews or reports on a friend, relative, employer, former teacher or anyone else with whom there's a relationship that could lead to conflict of interest, the student should always consult the assigning instructor before going ahead, and, if permission is granted, this relationship should be identified in the resulting assignment.

Departures from this policy will result in disciplinary action normally including a failing grade for the assignment at the discretion of the instructor.

##### Informed Consent:

##### [Name of the Project]

**[Your Contact Information]**

**Project Description**: [insert]

Procedure and Risks:

We would like to record the interview, if you are willing, and use the tapes to produce our materials. We will record the interview only with your written consent, and will ask that only the personal identifiers you allow be used during the interview, this includes your right to anonymity. Please feel free to say as much or as little as you want. You can decide not to answer any question, or to stop the interview any time you want. The tapes and transcripts will become the property of project.

If you so choose, the recordings and recording-transcripts (or copy of notes taken) will be kept anonymous, without any reference to your identity, and your identity will be concealed in any reports written from the interviews.

There are no known risks associated with participation in the study.

Benefits:

It is hoped that the results of this study will benefit the community through providing greater insight into the musical culture and history of our area.

Cost Compensation:

Participation in this study will involve no costs or payments to you.

Confidentiality:

No publications or reports from this project will include identifying information on any participant without your signed permission. If you agree to join this study, please sign your name on the following page.

**Consent Form**

[Name of project]

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby grant the right to use information from recordings and or notes taken in interviews of me, to [*your name or your institution*], and as presented to me as a draft copy. I understand that the interview records will be kept by the interviewer and the project, and that the information contained in the interviews may be used in materials to be made available to the general public.

*\_\_\_\_\_\_\_ By initialing here, I also agree to be identified by first name in the project and related materials.*

*\_\_\_\_\_\_\_ By initialing here, I also agree to be identified by full name in the project and related materials.*

*\_\_\_\_\_\_\_ By initialing here, I also agree to allow my contribution to the project and related materials to be distributed to the general public* (e.g. posted on the course website, streamed online)*.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Interviewee

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Interviewer

The following conditions limit the release of information, as agreed between the interviewer and the interviewee:

\_\_\_\_\_ None needed

\_\_\_\_\_ Material may be released once corrections I specify have been made