



June 2006

Dear Parent/Guardian,

I would be very grateful if you could allow _____ to participate in my research. I am a PhD student in the School of English at the University of Leeds where I am conducting research under the supervision of Dr Anthea Fraser Gupta (Senior Lecturer in English Language). You may be interested to know that my supervisor and I are both from Teesside.

My study, 'Language and Style in Two Teesside Primary Schools', will explore the way in which the children of Teesside speak. I will look at how the students and teachers within the school setting are using language creatively in their own ways. The children who take part in my study will be asked to take part in group discussions and other activities, which will be video recorded. The content of recordings made during normal school hours will be agreed in advance with the teacher and will be related to the curriculum. I expect the children to enjoy the sessions and learn from them. Recordings will also be made during normal school activities using a radio-microphone.

The identity of all participants in the study will remain confidential. Participants' names will never be used. Until 2020 the data will be kept securely and will be available only to me, my supervisor and my PhD examiners. I will quote from the data when I write about my research, but the children will all be absolutely anonymous. Towards the end of my research I will give a report to the school. If you would like a copy of the report, I will also send one to you.

The research that I do with your help will become a valuable resource for future researchers. For example, in years to come, researchers might like to look at how the English of Teesside has changed. After 2020, when the children are adults, I would like to be able to make my original recordings available for future researchers (the children will still be anonymous). This has been done with recordings from the past. If you are happy for _____ to participate in this study, please read the attached consent form. If you agree, please sign the attached form and return it to Mrs _____ at _____ R.C. Primary School. The consent forms will be kept securely in the School of English at the University of Leeds after the project, and will eventually be shredded.

If you have any questions or concerns about my study, please feel free to contact me (Tel: 0113 2403546 or 07901944645; email: j.snell04@leeds.ac.uk), or my supervisor (Tel: 0113 343 4750; email: a.f.gupta@leeds.ac.uk).

I do hope that you will be able to help me.

Thank you for your time.

Your sincerely,

Julia Snell (Miss)

Consent Form

Project title: *Language and Style in Two Teesside Primary Schools*



1. I have read the letter about this project.
2. I understand that my child will be asked to take part in group discussions and other classroom activities, within the curriculum, and approved by the class teacher, and that these will be video recorded.
3. I understand that the research is about the English of Teesside.
4. I agree to the arrangements described in the letter in so far as they relate to my child's participation.
5. I understand that my child's participation is entirely voluntary and that I have the right to withdraw from the project at any time.
6. I understand that my child's name will never be revealed in written or oral presentations of the study, and will never be associated publicly with any data from the study.
7. I understand that until 2020 the recordings will be accessible only to Julia Snell, Dr Anthea Fraser Gupta and the PhD examiners and will be used only for linguistic analysis.
8. I understand that portions of the recordings made will be transcribed in written reports, but that my child's identity will not be revealed.
9. I understand that after 2020 the recordings may be made available to other researchers, but that the children's identity will not be revealed.
10. I understand that I may contact Julia Snell (Tel: 0113 2403546 or 07901944645) if I have any questions or concerns relating to this project.
11. I give consent for my child to participate in the above-named study.

Name of child: _____

Name of parent/guardian: _____

Signed: _____

Date: _____

If you would like to have your own copy of the report to the school, please give me your address here. _____

