California State University, Dominguez Hills Informed Consent to Participate in Research

Option 3 – Workshop Effectiveness

You are being asked to participate in a research study that is a project for a graduate class. Before you give your permission, it is important that you read the following information and ask as many questions as necessary to be sure you understand what you will be asked to do.

Investigators: My name is Mehmet Larcin, I am a Graduate Student at California State University Dominguez Hills (CSUDH). My professor-advisor is Dr. Farah Fisher from the Department of Graduate Education at CSUDH. If you have questions, please contact either of us.

Your name Mehmet Larcin Your phone (310) 806-3227

Your email H Y P E R L I N K

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Purpose of the Study: The main purpose of this research is to determine the effects of an educational technology workshop on teaching and learning.

Description of the Study: I would like to choose the Option 3 and planning to use my TBE 550 (Adobe Photoshop for Educators) workshop web site design. My research question for this assignment-study will be; Is Adobe Photoshop helpful software to create and develop lesson plans and lessons more attractive and interactive? This workshop would be intended to made for K-12 middle school science, biology, community college art and even photography teachers. This workshop will be the introduction to Adobe Photoshop software and discuss the very basic tools and features of Adobe Photoshop.

If there is a further interest to learn more details about Adobe Photoshop software, further workshops-lessons will be given to the teachers in a timely manner, with setting up further workshops upon request. Handouts, lesson plan, and the power point presentation will be included as part of this workshop. I am planning to set up an interview and workshop with the teachers.

If you agree to participate in this study and attend the technology workshop, you will be asked to complete a workshop evaluation. Two or three participants will be chosen by the researcher for a follow-up survey/interview; the rest will only complete the workshop evaluation.

My professor and I will be the only ones to view your responses. A summary of the workshop evaluations and individual follow-ups will be presented during a class meeting, but your name and other identifying attributes will not be shared. No other publication or sharing of results will take place.

Please check one option below. Thank you for your time and support.

Yes, I agree to participate in the study.

No, I do not want to participate in the study.

Participant's Name	Signature of Participant