## ADOLESCENT PARTICIPANT ASSENT FORM

You are asked to help me in the research project described below. Your parents or guardian have given their okay, but you get to decide if you want to be in this study or not. You may stop or guit the study at any time by telling one of us and it is okay. If you want to know more about the study, it is okay to ask questions.

Title of Study: AfroChicano "Selfie" and Personal Story Project

Principal Investigator:	Robert Quintana Hopkins
	California School of Professional Psychology
	Email: robert@afrochicanopress.com
	Phone: 510-899-9753

## **ASSENT FORM**

Purpose: the purpose of this research is to understand how people from a mixed African American and Mexican American family identify themselves.

Procedures: You will be asked to share a photo (selfie) and a story about yourself. It will take about one hour for you to complete the online survey.

We will do everything to make sure that you do not get hurt in any way. You can use your real name or make up a name if you want. If you change your mind about participating just let me know. I'll withdraw your information if the research hasn't been published yet. I will securely store your information on my computer and then delete it once the research is finished, probably in a few years.

You can request a summary of the research results if you are interested.

If you understand what you are being asked to do and you decide to help, you are asked to sign your name below. You will be provided a copy of this form.

Printed Name and Signature of Adolescent

Researcher's Signature

THE ALLIANT INTERNATIONAL UNIVERSITY INSTITUTONAL REVIEW BOARD (IRB) HAS REVIEWED AND APPROVED THIS PROJECT.

Date

Date