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**Consent Form**

Host Organization: Southern Illinois University Edwardsville IRIS Center

Project Title: Conversation Toward a Brighter Future 2.0

Project Director: Dr. Jessica DeSpain, jdespai@siue.edu, 618-550-2151

Host School: (input school name)

Teacher Contact: (contact information for student facilitator’s teacher)

The purpose of the initiative is:

* To learn how the personal and cultural stories we tell inform our perspectives on aging.
* To understand how these stories impact our ability to speak across generations.
* To enact a conversation that fosters better communication across generations.
* To give residents of Madison County the opportunity to share their experiences about aging and stages of life.
* (If you would like to, add your own goal related to how you’re framing the project).

Name of Digital Storyteller: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Facilitator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I, the storyteller, will participate in a preliminary 20-minute meeting and subsequent 45-minute interview to share ideas, stories, and pictures with the student facilitator.
* I will provide feedback on the student facilitator’s storyboard after they have shared it with me in a format of my choosing.
	+ e-mail
	+ in-person (30-minute meeting)
* I will allow the CTBF 2.0 project team to write a summary report that may be shared with funders and others interested in learning about the project.
* I can decide whether to share my digital story publicly or keep it private.
* My participation in the project is voluntary. I may withdraw my agreement to participate in the project at any time, for any reason, without penalty of any kind.

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Signature of Storyteller Signature of Student Facilitator

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Date Date