

CONSENT to Participate in the EVALUATION of  
THE INCREDIBLE YEARS Program with INVEST IN KIDS

Invest in Kids (IIK) is working together with many Colorado communities to implement The Incredible Years (IY) program. IIK will work with your community and parent group leaders to successfully put the program into practice. IIK will also coordinate an evaluation of the program with activities and questionnaires that explore the impact of IY on the children, families, teachers and facilitators who participate in the program.

The program is designed to promote or strengthen positive relationship-based strategies for children, their parents, and their teachers that help prepare children to succeed in school and in life. We would like you to complete the following different forms:

- Parent Profile: provides descriptive information about you and your family
- Social Competence Scale: describes your child's behaviors at home
- Parenting Practices Interview: describes the kind of parenting strategies you currently use with your child

We will ask you to complete the Parent Profile *once* at the beginning of your parent group. We will also ask you to complete the Social Competence Scale and the Parenting Practices Interview *twice*, once at the beginning of your parenting group and once again at the end of your parent group. We ask you to complete the Social Competence Scale and the Parenting Practices Interview *twice* because we would like to see if there are changes in your parent strategies or your child's behavior after your participation in the program. We will also ask you to complete a short Weekly Evaluation at the end of *each session* and then the Parent Group Satisfaction Questionnaire at the end of the program.

**Your name, your child's name or any identifying individual or family information will not be shared with anyone and will not be used to report the results of this evaluation. Your information will be combined with the information from the other children and families and no one who reads the report will be able to identify your child or your family.** Please contact Carole Broderick, Ph.D., Evaluation Director at 303.839.9422 ext. 130 should you want to speak to someone about this evaluation. You may withdraw your consent at any time with no consequence to you or your child.

*I have read and understood the forgoing descriptions of the evaluation of The Incredible Years. I have asked for and received satisfactory explanations of any language that I did not understand. I agree to release the information in the Parent Profile, Social Competence Scale, Parenting Practices Interview, Weekly Evaluation, and the Parent Group Satisfaction Questionnaire to Invest in Kids. I also understand that I may withdraw my consent at any time.*

*I will return one copy of the consent form to the Parent Group Leaders and keep one copy for myself.*

Parent Name: [Please Print] \_\_\_\_\_

Child's Name: [Please Print] \_\_\_\_\_

Parent Phone Number: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Child's School: \_\_\_\_\_ Child's Teacher's Name: \_\_\_\_\_

Please check if your child is in a Dina classroom