

Contact information

If you have any questions or concerns about this study or if any problems arise, please contact Catalina Goldstein at Catalina.Goldstein@tu.edu. If you have any questions or concerns about your child's rights as a research participant, please contact the Touro University Graduate School of Education at **707-638-5986**.

Consent

I have read this parental permission form and have been given the opportunity to ask questions. I give my permission for my child to participate in this study.

Participant's signature *Hyla Adler* Date: 9/17/19

Child's Name: Jasmine S. Boyle

A copy of this parental permission form should be given to you.

Please
SIGN
and
RETURN

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Participant's signature _____



Date: _____

9/17/18

Child's Name: _____

Diego Gonzalez

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Participant's signature Jesus Garcia Rea Date: 9/24/18

Child's Name: Jesus Garcia Rea

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Participant's signature Wendy CS Date: 09-25-18

Child's Name: Valeria Barvagan

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Participant's signature Blanca E. Prado Date: 9-27-2018

Child's Name: Gabriel Maximiliano Prado

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Participant's signature *Reuanda Buckner* Date: *9-17-18*

Child's Name: *Christopher Buckner*

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Participant's signature *Amal Walling* Date: 9/17/18

Child's Name: Nahzier Pendar

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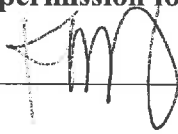
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Participant's signature



Date:

9.17.2010

Child's Name:

LEONARDO OLAES

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Participant's signature *Janessa Cuervas* Date: *9/20/2018*

Child's Name: *Kevin Ochoa Cuervas*

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Participant's signature *Ashley* Date: 9/18/18

Child's Name: Jeffrey "Noah" Nicolai

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Participant's signature Maria Mendoza Date: 9/20/18

Child's Name: Cindy Diana Mendoza

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Participant's signature *Donia Bay* Date: *9/17/18*

Child's Name: *Daniya Jones*

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Participant's signature *Yeni Lopez* Date: 9/19/18

Child's Name: Ximena N. Lopez.

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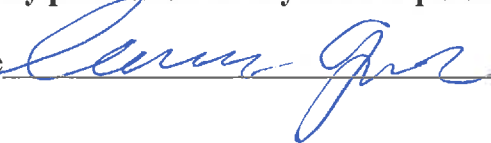
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Participant's signature  Date: 9-18-18

Child's Name: Jesse Diaz

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Participant's signature Jayson Campos Date: 9/20/2018

Child's Name: Jayson Julian Campos

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Participant's signature Mrdah' Date: 9/18/2018

Child's Name: Aurqaiyyah Faisal

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