Informed Consent for
Evaluating the Usability of Programming Tools

Project Title and Purpose
You are being asked to participate in a study in which you will evaluate different programming tools. You will interact with the Eclipse programming environment. This study is part of research being conducted at North Carolina State University in the Computer Science Department. This study will provide valuable information to help us better understand how programmers use programming tools.

Primary Investigators
Chris Brown – NCSU Computer Science
Justin Smith – NCSU Computer Science
Tyler Albert – NCSU Computer Science
Emerson Murphy-Hill – NCSU Computer Science

Eligibility
You may participate in this study if you are an experienced Java programmer. Anyone who does not meet the criteria is not eligible for this study.

Overall Description of Participation
If you choose to participate in our study, you will be shown several different programming tools. You will be asked to use those tools to complete specified programming tasks. As you complete these tasks we will log your interactions using screen capture and audio recording software. After completing these tasks, you will be asked to respond to several discussion questions and complete a brief questionnaire. Finally, we will ask you to complete a demographic survey.

Your participation will be kept confidential.

Length of Participation
The session will last about an hour. We do not plan for any follow-up study.

Risks and Benefits of Participation
The study will not result in any known risks to you beyond normal computer use, but there may be risks unknown at present.

Volunteer Statement
You are a volunteer and willing to be recorded by a voice recorder during the interview. You also are willing to have your tool interactions captured in the form of logs and screen recordings. The decision to participate in this study is completely up to you. If you decide to be in the study, you may stop at any time. You will not be treated any differently if you decide not to participate in the study or if you stop once you have started.

Confidentiality Statement
Any information about your participation that is collected by us will be completely confidential. The following steps will be taken to ensure this confidentiality: A unique code will be generated to label your responses and voice recording for anonymity. The code will also be used to associate your voice recording with the screen recording. The generated code will not have any relation to your real identity. All the recorded data will be stored on the password protected hard drive located in a locked office.
Statement of Fair Treatment and Respect
If you feel you have not been treated according to the descriptions in this form, or your rights as a participant in research have been violated during the course of this project, you may contact Deb Paxton, Regulatory Compliance Administrator at dapaxton@ncsu.edu or by phone at 1-919-515-4514.

Approval Date
This form was approved for use on xx/xx/2016 for use for one year.

I have read the information in this consent form. I have had the chance to ask questions about this study, and those questions have been answered to my satisfaction. I am at least 18 years of age, and I agree to participate in this research project. I understand that I will receive a copy of this form after it has been signed by me and the principal investigator of this research study.

______________________________  _______________________
Participant Name (PRINT)           DATE

______________________________
Participant Signature

______________________________  _______________________
Investigator Signature           DATE