Menu Selection Techniques Study
Consent Form

FOR QUESTIONS ABOUT THE STUDY, CONTACT:
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DESCRIPTION: You are invited to participate in a research study on using different command selection mechanisms for performing a "Connect the dot" task. You will be asked to connect series of colored dots on the computer screen using different command selection mechanisms. During the session, audio/video taping may take place and your interaction with the computer will be logged for analysis purposes. This information will not be disclosed to others and the data will be discarded after the study is over.

RISKS AND BENEFITS: There are no risks associated with this study. The benefits that may reasonably be expected to result from this study are better command selection mechanisms for future human computer interfaces.

TIME INVOLVEMENT: Your participation in this experiment will take approximately one and a half hours.

PAYMENTS: You will receive no payment for your participation.

SUBJECT’S RIGHTS: If you have read this form and have decided to participate in this project, please understand your participation is voluntary and you have the right to withdraw your consent or discontinue participation at any time without penalty. You have the right to refuse to answer particular questions. Your individual privacy will be maintained in all published and written data resulting from the study.

If you have questions about your rights as a study participant, or are dissatisfied at any time with any aspect of this study, you may contact - anonymously, if you wish - the Administrative Panels Office, Stanford University, Stanford, CA (USA) 94305-5401 (or by phone (650) 723-2480 - you may call collect).

I give consent to be audio/videotaped during this study:
(please initial):           __ Yes           __ No

I give consent for tapes resulting from this study to be shown at scientific meetings:
(please initial):           __ Yes           __ No

The extra copy of this consent form is for you to keep.

SIGNATURE _____________________________ DATE ____________

Name (PRINT) _____________________________________________ Your ID __________________

Approval Date:  3/29/2002
Expiration Date:  3/29/2003