



Urban Alliance Parent/Guardian Approval and Release

Parent/Guardians support will be an important part of the Urban Alliance program. Your signature is required for your student to apply and participate in the High School Internship Prep Program.

If selected for The Urban Alliance Junior Program, Intern(s) will attend professional development workshops after school, twice a week from 3:00pm-4:30pm. Upon successful completion of the High School Internship Prep Program Intern(s) will transition into their senior year where he/she will report to his/her jobsite Monday-Thursday 2:00pm-5:00pm. Senior Interns will attend professional development workshops once a week throughout their entire senior year. Senior Intern(s) will have the opportunity finish off his/her internship 5-6 weeks into the summer while continuing to attend workshop once a week.

I _____ (print name), as legal guardian of _____ (print students name) hereby authorize him/her to participate in the aforementioned activities. I agree to allow his/her assigned representative of Urban Alliance to obtain his/her academic and or attendance records. I agree to allow any representative of Urban Alliance to obtain his/her college attendance records from the National Student Clearinghouse. I certify that the information filled out on the previous pages is correct to the best of my knowledge.

I understand that my student's participation in the Urban Alliance Program may be terminated at any time if she/he is unable to abide by Urban Alliance policies, or demonstrate inadequate performance during professional development workshop. I understand that Urban Alliance promotes self-sufficiency; therefore, primary communication must be held between my student and his/her Program Coordinator.

I also understand that my student's internship opportunity may be terminated if I contact his/her jobsite and/or Mentor directly regarding any issues and or concern's. Furthermore, I understand that my concerns must be directed to my student's Program Coordinator and or the Urban Alliance team, as the Intern is employed by Urban Alliance. I acknowledge that it is prohibited to contact mentors or jobsites as a matter of Urban Alliance policy.

Please select one: YES, I agree NO, I do not agree

In addition, I authorize Urban Alliance or its designees to take and use photographs, audio/visual recordings, quotes, or stories of my student or their experience with Urban Alliance publicly in any form (including, but not limited to, marketing, communications/public relationships, and media (traditional and social)) in support of our program.

Please select one: YES, I agree NO, I do not agree

Parent/Guardian's signature _____ Date _____

Daytime phone # (_____) _____

Evening phone # (_____) _____

Comments or Concerns:



May 25, 2018

Dear Parent or Guardian,

For 20 years, Urban Alliance has helped to prepare students in Baltimore, MD; Chicago, IL; Washington D.C.; and Arlington and Alexandria, VA for college and career by connecting them to paid, professional internships, rigorous skills training, and caring adult mentors. Our success is well-documented: nearly 80% of alumni attend college and persist into their second year. Of recent graduates of the Urban Alliance Program, 80% are connected to a pathway – including college, employment, and advanced career training – one year post-program. Due to this success, Urban Alliance has received funding from the AT&T Foundation to expand programming into Fairfax, VA. Your child has had an opportunity to participate in the High School Internship Prep Program (HIPP) because of this funding.

Westat, a research group, is conducting an evaluation on behalf of AT&T on all their grantees to estimate how participation may positively impact school attendance, GPA, and on-track to graduation status. We are working to ensure that all parents and guardians are aware of this evaluation. The study relies on school records only and no identifiable data about your child will be shared in the results.

While we hope that you will provide your consent for your child to be included in this research, please know that it does not impact your child's ability to participate in the program. Please review and sign the attached Westat Parent/Guardian Informed Consent Agreement. Your child will then submit the completed agreement along with the other application materials to the school counselor. If you have any questions please contact me, Christine McCurdy, the Executive Director of Northern Virginia, at 202-735-2359.

Sincerely,

A handwritten signature in cursive script, appearing to read "Christine McCurdy".

Christine McCurdy, Executive Director



Westat Parent/Guardian Informed Consent Agreement

Purpose of the study: AT&T is funding the Urban Alliance program in Fairfax County Public Schools, and this independent evaluation. Your child is already participating in Urban Alliance through another agreement. Completing this form will allow your child to be included in the external evaluation of Urban Alliance conducted by Westat for AT&T. The evaluation of *the program* is a requirement of continued funding of Urban Alliance, however you and your child's participation is strictly voluntary. The purpose of the Westat evaluation is to estimate how participation in Urban Alliance may positively impact school attendance, GPA, and on-track to graduation status.

What your child will do in the study: This study relies on school records only. Your child will not be asked to do anything beyond their normal participation in Urban Alliance. This form simply allows your child's anonymized school records (including basic demographic information, school attendance, GPA, and course credits) to be released from Fairfax County Public Schools to the external evaluator (Westat). Westat will not share the data with Urban Alliance.

Benefits and risks: There are no direct benefits to you or your child for participating in this study. The study may help us understand if participating in Urban Alliance positively impacts three school outcomes (school attendance, GPA, and on-track to graduation status) as compared to similar students who not participate in Urban Alliance. There are no anticipated risks to participating in this study.

Confidentiality: The information collected on your child in the study will be handled confidentially. Your child's data will be anonymously transferred to Westat (the external evaluator), which means that your child's name will not be collected or linked to any findings reported by the evaluator. Results of the evaluation will be released at the group-level only, it will be impossible to identify individuals from data or from the report.

Voluntary participation: Your child's participation in the study is completely voluntary. Neither your child's grades, nor their participation with Urban Alliance, will be affected by the decision to participate in the study.

Right to withdraw from the study: You have the right to withdraw your child from the study at any time. If you want to withdraw your child from the study after signing this form, please contact the individual listed below. There is no penalty for withdrawing.

If you have questions about the study, contact:

Dan Tsin
Director of Data and Accountability
Urban Alliance
2030 Q Street NW,
Washington, D.C. 20009
Phone: (202) 735-2351
Mobile: (848) 459-5935
Email: dtsin@theurbanalliance.org

I agree to allow my child to participate in the research study described above. **Check one.** Yes No

Student Name: _____

Parent Signature: _____ **Date:** _____

Parent Name (print): _____

If you wish to receive a copy of this consent form, please contact Dan Tsin, dtsin@theurbanalliance.org.