

**Informed Consent- Web Usability Study, Oklahoma State University Library**

**Purpose:** The purpose of this usability study is to improve the design of the Oklahoma State University (OSU) Library web site. We are interested in determining if people can accomplish common tasks and easily find information using the library web site. Your participation will involve doing some or all of the following things: using a computer, reading, interacting with librarians, thinking aloud (explaining what you're doing and thinking), and filling out questionnaires.

You \_\_\_\_\_ **[print name]** freely and voluntarily consent to having your image and voice recorded by the OSU Library for the library web page usability study on \_\_\_\_\_ **[date]**.

Your name will not be publicly displayed with the video recording. Demographics about you may be associated with your recorded session (such as student classification, frequency of library use, and college major]. Your session will be identified by an internal OSU Library Digital Library Services tracking number and the session date. This consent form will be associated with the tracking number and session date for internal purposes only.

Your recorded image and voice will be used by OSU Library faculty and staff for internal improvement of the library web pages. Brief segments of your recorded image and/or voice may also be used for educational library presentations or publications related to libraries or information technology, unless you state otherwise on this document. Your name will not be included in these presentations.

Your participation is completely voluntary and you may discontinue participation and withdraw your consent without penalty or prejudice at any time during the session. If you desire to withdraw from participation after the session is recorded, you can submit withdrawal of consent in writing to the library address below and any tape made of the session will be destroyed.

OSU Library  
Digital Library Services Department  
215A Edmon Low Library  
Stillwater, OK 74078  
Ph: 405-744-9161

You have read and understood the procedures for the usability study and received a copy of this form on the day of the recording.

**Restrictions [if any]** \_\_\_\_\_  
\_\_\_\_\_

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

**Name [Please Print]** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City, State Zip** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Email Address** \_\_\_\_\_

*I certify that I have personally explained this document before requesting that the participant sign it.*

**OSU Library Representative** \_\_\_\_\_ **[print name]**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_