

Dear Parents,

My name is Rachel Sragovicz and I am an 8th grader in Marshall Middle School. I am working on a science fair project and I chose a child growth and development. The goal of my project is to determine if the amount of technology a child uses at home affects their learning style.

I plan to give out two tests. The first test will be given by me, and I will be asking them questions about shapes, numbers etc. The second test will ask similar questions but will be distributed by an Ipad or phone.

The results will be anonymous and only the age of your child will be recorded. No personal information will be disclosed. All testing will be done under supervision of a qualified preschool teacher. I would like to have the privilege of having your child participate in my project with your permission.

Please answer following questions:

Does your child play games on computers, Ipads, or any other electronic devices?
____ Yes ____ No

How often does your child plays games on these devices daily?

____ 0-1 hours ____ 1-2 hours ____ 2-3 hours ____ 4+ hours

Thank you! I look forward to working with your child,

Rachel Sragovicz

I give permission to Rachel Sragovicz to include my child in her science fair project.

Child's Name Age Date

Parent/Guardian Name (Please Print) Parent/Guardian Signature

Parent Consent Form:

Dear Parents,

I started testing the students and collected very interesting data.

In order to better analyze the data, I need some additional information.

Please CHECK the number of hours your child is using technology (computer apps, games, etc.)

In addition tell us how much time your child is watching TV on the typical weekend day.

Names	Tv Time	0-30 min	30 min- 1 hour	1-2 hours	2-3 hours
Ava					
Grant					
Carson					
Ben					
Ally					
Peter					
Sam					
Cody					
Dan					
Tyler					
Zach					