



Instructor Signature

Instructor Guidelines and Materials

Appendix C

Kansas Informed Consent Form

National Safe Tractor and Machinery Operation Program

Instructor:		Phone:	
Address:		Fax:	
	Email:		
 Purpose of the Pro 	ogram: The purpose of this program is to	instruct youth in safe tractor a	and machinery operation to meet the training
2. Procedures to be tractors and relate examination, a tra	d machinery. Certification upon complet	of the project you will receive tion of the instructional phase and completion of a tractor ar	nd machinery driving course. Participants
 Discomforts and I Benefits: Participe a certificate of cor- occupations at 14 include a more kn age group of agric 	Risks: The risks associated with participal ants will learn the basics of safe tractor a suppletion indicating they have met minim or 15 years of age where tractor and made owledgeable and safer youth workforce	ation are not beyond those exp and machinery operation. Parti- num requirements and are eligi- chinery operation are identified in agriculture and a reduction outh training program will also	erienced in every day life. icipants completing the program will be issued ible for employment in agricultural d as job requirements. The benefits to society in the number of injury incidents within this o influence older agricultural workers through
5. Duration/Time: A demonstrations ar	minimum of 24 hours of instruction is r	equired. The program will confidence of the materials presented. Confidence of the materials presented.	nsist of classroom instruction with laboratory inpletion of the program will include a written,
6. Statement of Con- information, data, of the National Sa available only to t	fidentiality: Participation in this education	onal training and national certi- idential. Information used to so ogram will be viewed as group d to issue certificates of complete.	letion to successful participants and for
7. Right to Ask Que	stions: Participants and their parents have directed to your instructor.		
8. Compensation: T	here is no compensation for participation		
	pation: Participation is voluntary. Partici ecline to answer specific demographic or		study at any time by notifying the instructor.
	tand the above information and agree to describe describing the declare that I attached in this project.		
You will be given a co	py of this consent form to keep for your	records.	
Print Name		Age	Date of Birth
Participant Signature		Date	
Parent Signature		Date	
I, the undersigned, veri	fy that the above informed consent proce	edure has been followed.	

Date