

INFORMED CONSENT FORM
Institutional Review Board, Bucknell University

Research Study: Antarctic Tourism Experiences

Researcher: Dr. Clare Sammells, Associate Professor of Anthropology, Bucknell University

Greetings! I am a cultural anthropologist conducting ethnographic research on Antarctic tourism. This form explains what I will be doing, and what happens to the data I collect, and asks if you wish to participate in this research.

I would like to talk to you about your experiences on this trip in whatever way you are comfortable. I may ask about your thoughts about Antarctica, tourism, citizen-science projects, wildlife – but I would like to hear about anything you think is important. I hope that observing details of what occurs *during travel* will give insight into what exactly about these experiences is illuminating or transformative.

Confidentiality

The only risk to you with participating in this investigation is that someone could discover what you tell me. To avoid this risk, I maintain the confidentiality of all information shared with me in the following ways:

- 1) I only record conversations with the permission of all participants. If you do not wish me to record, I will take only handwritten notes.
- 2) I never put names or surnames on recordings or written notes that I take during interviews.
- 3) I maintain these signed informed consent forms separately from other types of data.
- 4) I maintain all information for this investigation (notes, recordings, and photos) on a password-protected computer.
- 5) I never use names, surnames, or other identifying information in my reports or publications, EXCEPT when you have seen the parts that pertain to you, and you have given me permission to use it.

Your Rights

You may take the time you wish to read this form, and ask me questions, before you decide whether to participate in this research.

You may show this form to other people and talk to me about it later.

You have the right to not participate in this study.

You have the right to not answer any question you do not wish to answer.

You have the right to stop participating in this study at any point.

Benefits of Research

I will use the data collected during this research in publications, academic conferences, and in my college classes. I will also offer a general report to GCCL. If you wish to receive copies of publications that result from this research, please provide me with your email address. You can request this information without participating in the study itself, nor do you need to sign this form. (That email list is also maintained separately from all research data.)

Consent

Please indicate your consent by initialing the statements below that you agree to, and then sign this form. I will give you another copy of this form for your records. By signing this document, you are indicating that I have explained this research to you and answered any questions you have up until now, and also that you are at least 18 years of age.

_____ I agree to participate in this study through casual conversations and observations.

_____ I agree to be interviewed and recorded. These recordings will never be made public, but may be transcribed and quoted anonymously *without* information that would identify me.

_____ I agree that identifiable photos of me may be used in college lecture materials or in academic publications.

Signature:

Date:

Name:

If you have questions about this investigation, you may contact me at any time.

Address: Dept. of Sociology/Anthropology, Bucknell University, Lewisburg PA 17837, USA.

Email: ateproject@bucknell.edu

Webpage: <https://claresammells.scholar.bucknell.edu>

Antarctica Travel Experience project webpage: <http://www.projects.bucknell.edu/antarctour/>

If you have questions about this study, or are disturbed by any aspect of this investigation, you may also write to Dr. Matthew Slater, IRB Chair, Bucknell University, Lewisburg PA 17837, USA.

Email: matthew.slater@bucknell.edu