# **Informed Consent Agreement for Participation**



## **Investigator(s):**

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#### **Contact Information:**

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#### **Department:**

Interactive Media & Game Development Program, WPI

# The Evaluation of Uncertainty in Game System

You are being asked to participate in a research study. Before you give your consent to volunteer, it is important you read the following information and ask as many questions as necessary to be sure you understand what you will be asked to do.

# **Purpose of the Study:**

This study is aiming to find the connections between the game-playing experience, players' engagement, the difficulty levels, and the degree of uncertainty in games, which tightly related with the time spent in finding optimal strategy for players. Increasing uncertainty or adding rules that may generate more uncertainty will makes it harder for player to get closer to the optimal strategy.

#### **Procedures to be followed:**

The entire experiment will be divided into several parts. In each part, participating subjects will be asked to play different versions of the Connect-4 video games with rules-modified. The duration of the subject's participation in the entire experimental procedure is estimated to be 25 to 35 minutes.

#### **Risks to study participants:**

No risk greater than experienced in everyday life.

# Benefits to research participants and others:

Entertainment.

#### Record keeping and confidentiality:

The research will record the gender (gender identity) and the game playthrough data of the participating subjects. This data will be recorded by the student investigator(s) for analysis and keeping, and will appear in the report as diagrams of experimental data in the research. The study will not disclose the subject's name and

any information that would identify the subject. Records of your participation in this study will be held confidential so far as permitted by law. However, the study investigators, the sponsor or it's designee and, under certain circumstances, the Worcester Polytechnic Institute Institutional Review Board (WPI IRB) will be able to inspect and have access to confidential data that identify you by name. Any publication or presentation of the data will not identify you.

## Compensation or treatment in the event of injury:

The research will not involves any risk of injury or harm. You do not give up any of your legal rights by signing this statement.

### **Cost/Payment:**

Each participant who completes the experiment for the first time will receive a \$5 electronic transfer or gift card.

# For more information about this research or about the rights of research participants, or in case of research-related injury, contact:

You can contact the student investigator (Shano Liang, Tel. 508-826-5828, Email: <a href="mailto:sliang1@wpi.edu">sliang1@wpi.edu</a>), IRB Manager (Ruth McKeogh, Tel. 508-831-6699, Email: <a href="mailto:irb@wpi.edu">irb@wpi.edu</a>), and the Human Protection Administrator (Gabriel Johnson, Tel. 508-831-4989, Email: <a href="mailto:gjohnson@wpi.edu">gjohnson@wpi.edu</a>).

# Your participation in this research is voluntary:

Your refusal to participate will not result in any penalty to you or any loss of benefits to which you may otherwise be entitled. You may decide to stop participating in the research at any time without penalty or loss of other benefits. The project investigators retain the right to cancel or postpone the experimental procedures at any time they see fit.

**By signing below,** you acknowledge that you have been informed about and consent to be a participant in the study described above. Make sure that your questions are answered to your satisfaction before signing. You are entitled to retain a copy of this consent agreement.

	Date:	
Study Participant Signature		
Study Participant Name (Please print)		
	Date:	
Signature of Person who explained this study		