

Informed Consent Letter

TITLE OF STUDY

The Interactive Effect of Stressor Appraisals and Personal Traits on Employees' Procrastination Behavior: The Conservation of Resource Perspective

PRINCIPAL INVESTIGATOR

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PURPOSE OF STUDY

You are being asked to take part in a research study. Before you decide to participate in this study, it is important that you understand why the research is being done and what it will involve. Please read the following information carefully. Please ask the researcher if there is anything that is not clear or if you need more information.

The purpose of the current study is to explore the direct impact of external situational factors (ie, stressor appraisals) and individual traits (ie, personality) and their interactive effect on workplace procrastination behavior. In the first stage (Time 1), you are being asked to filled out your e-mail, demographic information and assessed the perceived red tape, role overload, perceived overqualification. In the second stage (conducted one months later), you are asked to assess your procrastination behavior.

STUDY PROCEDURES

You may decline to answer any or all questions and you may terminate your involvement at any time if you choose. that the research survey was only for academic purposes, and there were no right or wrong answers. And the confidentiality of your responses and that your personal information would be removed from the dataset after the study.

BENEFITS

There will be no direct benefit to you for your participation in this study. However, we hope that the information obtained from this study may enriches the theoretical research on procrastination behavior among public sector employees

CONFIDENTIALITY

Your responses to this survey will be anonymous. Please do not write any identifying information on your survey. Every effort will be made by the researchers to preserve your confidentiality including the following:

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Participant data will be kept confidential except in cases where the researcher is legally obligated to report specific incidents. These incidents include, but may not be limited to, incidents of abuse and suicide risk.

CONTACT INFORMATION

If you have questions at any time about this study, you may contact the researcher whose contact information is provided on the first page.

VOLUNTARY PARTICIPATION

Your participation in this study is voluntary. It is up to you to decide whether or not to take part in this study. If you decide to take part in this study, you will be asked to sign a consent form. After you sign the consent form, you are still free to withdraw at any time and without giving a reason. Withdrawing from this study will not affect the relationship you have, if any, with the researcher. If you withdraw from the study before data collection is completed, your data will be returned to you or destroyed.

CONSENT

I have read and I understand the provided information and have had the opportunity to ask questions. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving a reason and without cost. I understand that I will be given a copy of this consent form. I voluntarily agree to take part in this study.

Participant's signature _____ Date _____

Investigator's signature _____ Date _____