

## Participant Consent Form

Title of Research Project:

Name of Researcher:

**Participant Identification Number for this project:      Please initial box**

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| <p>1. I confirm that I have read and understand the information sheet dated <i>[insert date]</i> explaining the above research project and I have had the opportunity to ask questions about the project.</p>  | <input style="width: 60px; height: 30px; border: 1px solid black;" type="checkbox"/> |
| <p>2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason and without there being any negative consequences. In addition, should I not wish to answer any particular question or questions, I am free to decline.</p> | <input style="width: 60px; height: 30px; border: 1px solid black;" type="checkbox"/> |
| <p>3. I understand that my responses will be kept strictly confidential; this means that all possible identifying data will be removed including name and date of birth.</p>   | <input style="width: 60px; height: 30px; border: 1px solid black;" type="checkbox"/> |
| <p>I give permission for members of the research team to have access to my anonymised responses. I understand that my name will not be linked with the research materials, and I will not be identified or identifiable in the report or reports that result from the research.</p>    | <input style="width: 60px; height: 30px; border: 1px solid black;" type="checkbox"/> |
| <p>4. I agree for the data collected from me to be used in future research</p>   | <input style="width: 60px; height: 30px; border: 1px solid black;" type="checkbox"/> |
| <p>5. I agree to take part in the above research project.</p>  | <input style="width: 60px; height: 30px; border: 1px solid black;" type="checkbox"/> |

Name of Participant <i>(or legal representative)</i>	Date	Signature
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Name of person taking consent <i>(if different from lead researcher)</i> <i>To be signed and dated in presence of the participant</i>	Date	Signature
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Project Coordinator <i>To be signed and dated in presence of the participant</i>	Date	Signature
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**For records:**

*The information sheet and the signed and dated copy of the consent form to be provided to the participant.*

*The researcher and project coordinator must keep signed and dated copies of all participant consent forms in a secure location.*