CONSENT FORM



	Name of Researcher			
Name of Participant		Date	Signature	
c.		the ESRC, no	made available outside the r in any publications. My v	
b.	I may not be identified in reports made available outside the research team and the ESRC, nor in any publications. My words may be quoted provided that they are anonymised.			
 I may be identified in reports made available outside team and the ESRC, and in publications. 				
	e choose one of the f nterview may be used		ns regarding the way in w t:	hich Please tick box
4. I agre	e to the interview beir	ng audio recoi	rded.	Please tick box Yes No
3. I agre	e to take part in the a	bove study.		
	erstand that my partic aw at any time, witho		ntary and that I am free to ason.	
	irm that I have read a study and have had		d the information sheet for ty to ask questions.	
	cturer in International Re pokes University e (3 0BP	elations		Please initial bo