***Families of Adult Persons reported as missing Research Project***

CONSENT FORM

NB. This form must be completed by the respondent and signed in the presence of the researcher

**Tick appropriate box**

Have you read and understood the Information Sheet? Yes ❒ No ❒

Have you been given an opportunity to ask questions and further

discuss this study? Yes ❒ No ❒

Have you received satisfactory answers to all of your questions? Yes ❒ No ❒

Do you understand that your participation is entirely voluntary? Yes ❒ No ❒

Do you understand that you are free to withdraw from this study: At any time? Yes ❒ No ❒

Do you agree for your interview to be digitally recorded? Yes ❒ No ❒

Do you agree that digital recorded interviews can be transcribed by a trusted

and confidential service known to the University of Glasgow if necessary? Yes ❒ No ❒

Do you understand that the anonymised information provided and your words may be used in writing likely to be read by others. These are academic and training publications manly, but may include web-based or media reports?

Yes ❒ No ❒

The funders ask that information from the project is made available for other researchers to use. Only information that is fully anonymised will be made available. Please tick the box if you agree to this. If you choose not to tick the box you can still be a part of the project.

Yes ❒ No ❒

Do you agree to take part in this study? Yes ❒ No ❒

Signature ……………………………………………. Date …………………..............................

Name in block capital letters ……………………………………………….........................................

Telephone contact (Home) ……………………… (Mobile)………………………...........................

Address: …………………………………………………………………………………………………