# CONSENT FORM

# untitled.JPGName of project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_

Name of organisation/individual: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please tick the appropriate boxes:*

|  |  |  |
| --- | --- | --- |
| **1** | **I confirm that the programme of research has been explained to me and I have read and understood the**  **Participant Information Sheet.** |  |
| **2** | **I understand that my responses will be kept confidential.** |  |
| **3** | **I understand that my participation is voluntary and that I may withdraw from this research project at any time, without penalty.** |  |
| **4** | **I understand that my responses will be recorded and that my personal details will be kept anonymous.** |  |
| **5** | **I understand that data relating to this project may be archived for use by other researchers.** |  |
| **6** | **I agree to take part in this research programme.** |  |
| **7** | **So that TSRC can use the information that I provide legally, I am happy to assign copyright of my responses to the TSRC. Any exceptions will be agreed with the researcher at the time of interview and will be honoured.** |  |

Name of participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Researcher ­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_