

Big Society Participant Consent Form (Easy Read)

Title of Project: Big Society? People with learning disabilities and civil society

Name of Researcher: Katherine Runswick-Cole



Participant Identification Number for this project

Please tick box

1. I confirm that I have read and understand the information sheet dated _____ for the above project and have had the opportunity to ask questions.

☐

2. I understand that I can say yes or no to Katherine Runswick-Cole about being involved in the research.

 **Yes** or  **No** to Katherine

☐

3. I understand that my real name will not be used and I agree that members of the research team can look at what I have to say once my name has been changed.

☐

4. I agree that my information can be saved in a database (on a computer) of information that can be used by other researchers

☐

Date: Name of Applicant:

5. I agree to take part in the above research project.

☐

Name of Participant
(or legal representative)

Date

Signature

Name of person taking consent
(if different from lead researcher)
To be signed and dated in presence of the participant

Date

Signature

Lead Researcher
To be signed and dated in presence of the participant

Date

Signature

Copies:

Once this has been signed by all parties the participant should receive a copy of the signed and dated participant consent form, the letter/pre-written script/information sheet and any other written information provided to the participants. A copy for the signed and dated consent form should be placed in the project's main record (e.g. a site file), which must be kept in a secure location.

Date: Name of Applicant: