



### Informed Consent Form for Participants

Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research.

Project title: Control of voluntary action

This study has been approved by the UCL Research Ethics Committee.

Thank you for your interest in taking part in this study. Before you agree to take part, the person organising the research must explain the project to you. If you have any questions based on the Information Sheet or the explanation that was given to you, please ask the researcher before you decide to participate.

Participant name (block capitals)		
Age		
Gender		
Handedness (circle)	LEFT	RIGHT

Please tick the appropriate boxes below:

- ☐ I have read and understood the information sheet
- ☐ I have been offered the opportunity to ask any questions and voice any concerns about the experiment
- ☐ I have received satisfactory answers to my questions
- ☐ I understand that my data will be treated strictly confidential and in accordance with the provisions of the Data Protection Act 1998
- ☐ I understand that my personal details will be kept for 5 years and then confidentially destroyed
- ☐ I understand that I am free to withdraw from the study at any point and without giving any reason
- ☐ I do not have any history of psychiatric or neurological illness
- ☐ I have not participated in any other brain stimulation experiments in the last 24hrs
- ☐ I agree that the research project named above has been satisfactorily explained
- ☐ I am willing to take part in the experiment

Participant signature		Date	
Experimenters signature		Date	