

CONSENT FORM

Remembering who was where

Please initial within each box

- ☐ I understand that my participation in this project will involve completing a simple computerised experiment on a touchscreen PC. At the start of each trial, I will have to memorise faces with emotional expressions that will be briefly presented. Then I will have to relocate one of them in the precise position where I saw it. I will have to touch and drag the face where I saw it previously. This task will take approximately 45 minutes. My eye movements will be recorded during that time. I understand that there are no known risks for me in this experiment.
- ☐ I understand that I will also complete 4 short questionnaires, about social anxiety, mood, social skills (autism spectrum quotient) and handedness. All questionnaires have the option to choose not to answer specific questions if you do not wish to do so. This whole session will require approximately 60 minutes of my time in total and will be completed in a single sitting.
- ☐ I understand that participation in this study is entirely voluntary and that I can withdraw from the study at any time without giving a reason and without loss of course credit or reimbursement of travel.
- ☐ I understand that I am free to ask any questions at any time. I am free to withdraw without providing a reason, or to discuss my concerns with Ilinca Tone or Evie Coleman (experimenters), Dr Sara Spotorno (experimenter and research fellow working on the project; sara.spotorno@abdn.ac.uk) or Dr Margaret Jackson (supervisor of the project; m.jackson@abdn.ac.uk).
- ☐ I understand that the information provided by me will be held anonymously so that it is impossible to trace this information back to me individually. Information will be held on a password protected computer in a locked room. In accordance with the Data Protection Act this information may be retained indefinitely. To ensure access to the data for the wider research community, the anonymous dataset may be archived in a UK Data Archive.
- ☐ I understand that at the end of the experiment I will be provided with additional information about the purpose of the study.
- ☐ I have had an opportunity to discuss with the experimenter any questions or concerns I have about the study at this stage.

I consent to participate in this study conducted by undergraduate Ilinca Tone or Dr Sara Spotorno, in the School of Psychology, University of Aberdeen under the supervision of Dr Margaret Jackson.

Name (PRINT):

Signed:

Date:

Experimenter (PRINT):

Signed:

Date: