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**CONSENT FORM FOR PARTICIPANTS IN RESEARCH STUDIES**

Title of Study: Constraints on the Design of Security Policy: Insights from Security and Defence Elites in the United Kingdom

**Ministry of Defence Research Ethics Committee Reference :** 590/MODREC/14

* The nature, aims and risks of the research have been explained to me. I have read and understood the Information for Participants and understand what is expected of me. All my questions have been answered fully to my satisfaction.
* I understand that if I decide at any time during the research that I no longer wish to participate in this project, I can notify the researchers involved and be withdrawn from it immediately without having to give a reason. I also understand that I may be withdrawn from it at any time, and that in neither case will this be held against me in subsequent dealings with the Ministry of Defence.
* I consent to the processing of my personal information for the purposes of this research study. I understand that such information will be treated as strictly confidential and handled in accordance with the provisions of the Data Protection Act 1998.
* I agree to volunteer as a participant for the study described in the information sheet and give full consent.
* This consent is specific to the particular study described in the Information for Participants attached and shall not be taken to imply my consent to participate in any subsequent study or deviation from that detailed here.
* I understand that in the event of my sustaining injury, illness or death as a direct result of participating as a volunteer in Ministry of Defence research, I or my dependants may enter a claim with the Ministry of Defence for compensation under the provisions of the no-fault compensation scheme, details of which are attached.
* I consent to the interview being audio recorded.

Participant’s Statement:

**I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**agree that the research project named above has been explained to me to my satisfaction and I agree to take part in the study. I have read both the notes written above and the Participant Information Sheet about the project, and understand what the research study involves.**

# Signed Date

**Witness Name**

 **Signature**

Investigator’s Statement:

**I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

confirm that I have carefully explained the nature, demands and any foreseeable risks (where applicable) of the proposed research to the Participant.

Signed Date

AUTHORISING SIGNATURES

The information supplied above is to the best of my knowledge and belief accurate. I clearly understand my obligations and the rights of research participants, particularly concerning recruitment of participants and obtaining valid consent.

**Signature of Principal Investigator**

**…………………………………………………… Date**

**Name and contact details of Principal Investigator:**

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