

CONSENT FORM

Working Memory Span

Investigator: Paula Hubber

The participant should complete the whole of this sheet himself/herself. Please cross out as necessary.

Have you read and understood the participant information sheet	YES/NO
Have you had the opportunity to ask questions and discuss the study	YES/NO
Have all the questions been answered satisfactorily	YES/NO
Have you received enough information about the study	YES/NO
Do you understand that you are free to withdraw from the study:	
at any time	YES/NO
without having to give a reason	YES/NO
Do you agree to take part in the study	YES/NO

"This study has been explained to me to my satisfaction and I agree to take part. I understand that I am free to withdraw at any time."

Signature of Participant:

Date:

Name (in Block Capitals):

I have explained the study to the above participant and he/she has agreed to take part.

Signature of researcher:

Date: