College of Business, Arts and Social Sciences



#### CONSENT FORM

**Education systems, aspiration and learning in remote rural settings**

|  |  |  |  |
| --- | --- | --- | --- |
| **The participant should complete the whole of this sheet** | | ***Please tick the appropriate box*** | |
|  | | YES | NO |
| Have you understood the information on the Research Participant Information Sheet? | |  |  |
| Have you had an opportunity to ask questions and discuss this study? | |  |  |
| Have you received satisfactory answers to all your questions? | |  |  |
| Do you understand that neither you nor your child will be referred to by name in any report concerning the study? | |  |  |
| Do you understand that your child is free to withdraw from the study: | | | |
| * at any time? | |  |  |
| * without having to give a reason for withdrawing? | |  |  |
| * without any negative repercussions? | |  |  |
| Do you agree to your child taking part in this study? | |  |  |
| Name in capitals: | Signature: | | |
| Date: | Respondent number: | | |