## Update of Participant Consent for Data Use and Storage

## (V.2 180119)

**Transport and Toilets: Finding solutions which maximise the design and findability of accessible toilets when travelling**

**Dear Co-researcher,**

In line with Data Protection laws we want to ensure that information about you is kept safe and secure. We will not use any personal information without your express permission. We are aware, however, that people hold different views and want to be sure that you have a choice around the way we use your data. By completing this form you can decide which information can and cannot be linked to you personally on the Transport and Toilets project.

**Please read the following statements in the table below, tick the relevant boxes and sign your name at the end of the agreement**.

|  |  |  |
| --- | --- | --- |
| I understand and agree to notes being kept in the Gathering meeting(s) and for these to be used to evaluate and publicise the research project | Yes |  |
| No |  |
| I understand and agree to my photograph being taken during the Gathering meeting(s) and for these to be used to evaluate and publicise the research project | Yes |  |
| No |  |
| I give permission for my name to be linked to the photographs I create as a participant co-researcher on the project | Yes |  |
| No |  |
| I give permission for my name to be linked to any written notes that I create as a participant co-researcher on the project | Yes |  |
| No |  |
| I give permission for my name to be linked to any audio recorded interviews that I am involved in as a participant co-researcher on the project | Yes |  |
| No |  |
| I give permission for my name to be linked to any video recordings that I interviews that I am involved in a participant co-researcher on the project | Yes |  |
| No |  |

By giving your signature, you are agreeing that: (1) you have read and understood the Participant Information and Participant Consent for Data Use and Storage Sheets, (2) any questions about the use of data in this study have been answered satisfactorily, (3) you are aware of the potential risks (if any), (4) you are giving permission for the use of data in this research study voluntarily (without coercion), and (5) anonymised data only may be shared in public research repositories.

Participant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Printed)\*

Participant’s signature\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_

Name of person obtaining consent (Printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Printed)\*

Signature of person obtaining consent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_

