**Form for Retrospective consent for Archiving Participant Data**

**Research Project Title: Anti-Microbials in Society (AMIS): A Global Interdisciplinary Research Hub**

I understand the process of data archiving and consent to any data about/from me/the participant may be shared via a public data repository or be shared directly with other researchers according to what is discussed in the “Information Sheet for Retrospective consent for Archiving Participant Data” (dated 09092020) and that I will not be identifiable from this information. I thereby give my signature.

I can contact the principal researcher, Dr. Komatra Chuengsatiansup, or co-researchers including Dr. Uravadee Chancheamseang M.D. and Mr. Sittichoke Chawraingern at Society and Health Institute (SHI), 3rd Floor, Building 88/37 (Warehouse) Public Health Soi 6, Ministry of Public Health, Tiwanon Roard, Taladkwan, Muang, Nonthaburi, 11000. Tel. 02-590-1498 Email: [loxlix@gmail.com](mailto:loxlix@gmail.com) (Dr. Komatra Chuengsatiansup) or uravadeec@gmail.com (Dr. Uravadee Chancheamseang) or [sitthichoke.chaw@gmail.com](mailto:sitthichoke.chaw@gmail.com) (Mr. Sittichoke Chawraingern)

I have read and voluntarily agree to the archiving of my data by sign this form.

(Signature).......................................................Name of Participant

(......................................................................)

Date..........Month...........................Year.............

(Signature).......................................................Name of Researcher

(......................................................................)

Date..........Month...........................Year.............