School of Psychology



**31.10.2018.**

**Postgraduate Researcher Survey**

**Consent Form**

**Study Title:** Postgraduate Researchers’ Well-Being – A Mixed Methods Study

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Please read the following statements and sign your name below to indicate that you agree to participate in the study.

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* *I have read the Information for Participants form and have understood the details provided, as well as what my participation in the study involves.*
* *I have had the opportunity to have my questions answered.*
* *I understand that my participation in this study is entirely voluntary, and that I can withdraw from the study at any time and for any reason, without having to provide an explanation or have any penalties imposed. I understand that I can do this by simply closing the browser, whereby my data will not be recorded.*
* *I understand that after I have submitted my responses at the end of the survey, I will be able to withdraw my data at any point until 1st May, 2019. I understand that in order to do this, I must record the exact time and date of my survey completion.*
* *I understand that non-identifiable data may be shared with collaborators of the research team to answer additional research questions.*
* *I understand that I can contact the researcher by e-mail to receive more information but not my personal responses.*

#### Name of Participant Date Signature