

## Informed Consent Form

## Project Title: Addressing the 'change' in memory. A herbal self-care approach to cognitive problems in the menopause transition.

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	please tick where ap	
I have carefully read and understood	the Participant Information Sheet.	
I have had an opportunity to ask ques answers.	tions and discuss this study and I have received satisfactory	
I understand I am free to withdraw from the study at any time, without having to give a reason for withdrawing, and without prejudice.		
I agree to take part in this study.		
I also consent to the retention of this data under the condition that any subsequent use also be restricted to research projects that have gained ethical approval from Northumbria University.		
about me. I understand that this info information sheet supplied to me, and with its duties and obligations under t	ria at Newcastle recording and processing this information rmation will be used only for the purpose(s) set out in the d my consent is conditional upon the University complying the Data Protection Act 2018 which incorporates General ou can find out more about how we use your information	
Name/signature of participant:	Date:	
Email address (required for linking to online assessments):		
Screening questions (please indicate): My memory is poor	Yes definitely, Yes sometimes, No not much, No not at all	
I have difficulty in concentrating	Yes definitely, Yes sometimes, No not much, No not at all	

Please email the completed form to <u>dale.r.metcalfe@northumbria.ac.uk</u>