**CCoM: Children Caring on the Move**

Consent form to take part in an interview for CCoM.

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| --- | --- |
|  | **Please tick**  **Yes No** |
| The research has been explained to me and I have had any questions answered | ❑ ❑ |
| I understand my participation is voluntary | ❑ ❑ |
| I understand that I can change my mind and stop taking part at any time, and that I don’t have to answer any questions that I don’t want to. I also understand that I can change my mind about being part of the project after the interview and before the research is published | ❑ ❑ |
| I understand that the results of this study might be published in reports or in academic journals | ❑ ❑ |
| I understand that people will read about the things I told you, but they will not know I said them | ❑ ❑ |
| We will record the interview, but this will be safely transferred to our research team. We are the only ones that will have access to it. | ❑ ❑ |

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| --- | --- |
| Name: |  |
| Signature: |  |
| Date : |  |
| Researcher’s signature: |  |