

**Work, Pay and Stress – Payment Contracts Study 2**

**CONSENT TO PARTICIPATE**

**Principle Investigators:** *Keith Bender and Julia Allan*

**Please initial the following as appropriate:**

- ☐ I have read and understood the information sheet on the above study and have had the opportunity to discuss the details with the researchers and ask questions.
- ☐ I have agreed to take part in the study as it has been outlined to me, but I understand that I am free to withdraw from the study or any part of the study at any time, without having to give a reason.
- ☐ I understand that these studies are part of a research project and may be of no direct benefit to me.
- ☐ I am happy for the saliva sample I give to be analysed for levels of salivary cortisol.
- ☐ I hereby fully and freely give my informed consent to take part in this study.
- ☐ I have completed a questionnaire regarding my recent health and potential symptoms related to COVID-19.
- ☐ I have read and understood the COVID-19 section of the information sheet and I have had the opportunity to ask questions.
- ☐ I understand the risks associated with participating in this study due to the current pandemic.

Name of participant: .....

Signature of participant: .....

Date: .....

I confirm that I have explained the nature and purpose of the study to be undertaken to the participant named above.

Name of Researcher: .....

Signature of Researcher: .....

Date: .....