**CONSENT FORM FOR PARTICIPATION IN RESEARCH**

Exploring informal carers' gendered experiences as shaped during the care of older individuals in need of rehabilitation

**Name and Surname of Participant in the research:**

**Date:**

**Signature:**

**Researcher's name:**

|  |  |
| --- | --- |
|  | **Please mark with x if you agree** |
| I certify that I have read and understood the written information regarding the above research given to me by the above researcher. I also confirm that I had the opportunity to study this information, to ask any question I had, and that all my questions are sufficient to be answered. |  |
| I understand that my participation in the above research is voluntary and that I am free to withdraw at any time, without being accountable and without any consequences for my rights. |  |
| I understand that I can request access to any information I provide at any time, and I can claim the destruction of the information I have provided if I wish. |  |
| I understand that my identity will not be revealed or I will not be recognised in any text resulting from the above research and produced by the above researcher. |  |
| I accept that my participation in the above research is voluntary, and I assure you that any risk associated with the above research has been fully explained to me. |  |
| I agree to participate in the above research. |  |
| I agree that my answers be recorded and used for the purpose of the research |  |