**CONSENT FORM FOR PARTICIPANTS** Please complete this form after you have read the Information Sheet. King’s College Research Ethics Committee Ref HR-20/21-21292: approved by the Psychiatry, Nursing & Midwifery Research Ethics Subcommittee, King’s College London.

* I confirm that I have read and understood the information sheet dated 06/06/22 (Version 4) for the above study. I have had the opportunity to consider the information and asked questions which have been answered to my satisfaction. (1)
* I understand that my participation is completely voluntary and understand that I can refuse to take part and can withdraw from the study at any time, without having to give a reason, up until 31/08/22. (2)
* I consent to the processing of my personal information for the purposes explained to me in the Information Sheet. I understand that such information will be handled in accordance with the terms of the General Data Protection Regulation (GDPR) and the UK Data Protection Act 2018. (3)
* I understand that my information may be subject to review by responsible individuals from the College for monitoring and audit purposes. (4)
* I understand that confidentiality and anonymity will be maintained, and it will not be possible to identify me in any research outputs. (5)
* I consent to my data being shared with third parties which are within the EU, such as other research scientists as outlined in the participant information sheet. (6)
* I agree that the research team may use my data for future research and understand that any such use of identifiable data would be reviewed and approved by a research ethics committee. (In such cases, as with this project, data would not be identifiable in any report). (7)
* I confirm that I am 18-24 years old. (8)
* I confirm I do not identify as having a moderate to severe learning disability or significant head injury, neurological disorder or epilepsy. (9)
* I confirm I can communicate fluent English. (10)
* I confirm I am registered university student. (12)