******Consent Form**

**example**

**study title**

NB – this form needs careful editing to align it with each specific research study

1. I agree voluntarily to take part in this study.
2. I confirm that I meet the criteria for participation in this study:

[ ]  I am over the age of 18 years.

[ ]  I have … [insert or amend details as appropriate]

I have neither of the following health conditions [edit as appropriate]:

[ ]  I do not have

[ ]  I have no

1. I have read the Information Sheet provided and been given a full explanation of the purpose of this study.
2. The researcher has answered all my questions and has explained possible problems that may arise as a result of my participation in this study.
3. I understand that I will be asked to [insert here the details of what participants will be asked to do e.g. as bullet points]
4. I understand that my name and identity will be stored separately from the data, and these are accessible only to the investigators. All data provided by me will be analysed anonymously using code numbers. . [modify this statement if needed]
5. I understand that I will not be identified in any publication arising out of this study.
6. I understand that all information provided by me is treated as confidential and will not be released by the researcher to a third party unless required to do so by law.
7. [ ]  I am willing for this session to be audio / video taped. [edit or remove as necessary]

[ ]  I am not willing for this session to be audio / video taped.

1. I understand I am free to withdraw from the study and stop participating at any time without needing to give any reason.
2. I agree to be contacted [ e.g. by phone two weeks from now] for a brief follow up survey. I would like to be contacted at the following phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (daytime / evening) for the purpose of this survey.

Name of participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: …..../..…../…….

I confirm that I have provided the Information Letter concerning this study to the above participant; I have explained the study and have answered all questions asked of me.

Signature of researcher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: …..../..…../…….