

{Example – To be amended according to your individual study}

# INFORMED CONSENT FORM

[NAME OF RESEARCH PROJECT]

## [Name of researcher(s)]

- I have read {or had read to me} the Information Sheet for Participants, which explains why this study is being done and my part in it. I understand it.
- I have had a chance to ask questions about the project, and I am comfortable with the answers that I have been given. I know that I can ask more questions whenever I like.
- I have volunteered to participate in the research. I know that I could have said 'No thank you'.
- I agree to *[summarise the mode of participation – "talk to the researcher", "join a focus group"]*. I know this it will take *[enter the duration]*.
- *[any condition relating to choices to not answer particular questions, or to stop recording/filming]*
- I know that I am free to withdraw from the study at any time. If I do withdraw there will be no adverse consequences for me.
- I agree for the information received to be used in publication, presentation, teaching and further research.
- If I withdraw from the study, none of the information I have given can be used in the research *[qualify this in a focus group or if the data are to be pooled for analysis]*.
- I know that the researchers will keep my information confidential *[or other commitment]* so far as the law allows.
- I have been told that we will not talk about *[a particular kind of topic]*. I will not pass on any *[particular kind of]* information. If I accidentally tell the researcher these kinds of things, they will try to stop me and will try not to record them.
- I know that I will not get paid for participating in the research project *[or I will be paid XXX to participate]*. Even though I am paid I don't have to answer all of the questions.

***I have read this Informed Consent Form and I agree with all the points listed above {OR suitable format for oral consent that is witnessed}.***

Signed by the research participant \_\_\_\_\_

Name of the research participant \_\_\_\_\_

Date \_\_\_\_\_

*I agree to having an audio tape made of the interview.* YES ☐ NO ☐

*I agree to having a video (or photographs) made* YES ☐ NO ☐

*[Include explicit details about everything that is acceptable to the participant or not – use in public display, acknowledgement, teaching further research etc].*