



Informed Consent Form

Project Title:

I confirm that (please tick as appropriate and add your initials alongside):

1.	I have been told about the purpose of the project and I understand this.	<input type="checkbox"/>
2.	I have been given the opportunity to ask questions about the project and my participation.	<input type="checkbox"/>
3.	I voluntarily agree to participate in the project.	<input type="checkbox"/>
4.	I understand I can leave the project at any time without giving reasons and that I will not be questioned about why I have left the project.	<input type="checkbox"/>
5.	The procedures regarding anonymity and confidentiality have been clearly explained to me (e.g. not using my real name, so that anything I contributed to this project cannot be recognized unless I give my consent; that only anonymised data will be shared outside the research team).	<input type="checkbox"/>
6.	The procedures regarding data anonymity have been clearly explained to me(e.g. not using my real name, so that anything I contributed to this project cannot be recognised).	<input type="checkbox"/>
7.	I agree to the use of voice recording if telephone, skype or in-person interviews are used.	<input type="checkbox"/>
8.	The use of the data in research, publications, sharing and archiving has been explained to me.	<input type="checkbox"/>
9.	I understand that other researchers will have access to this data only if they agree to preserve the confidentiality of the data and if they agree to the terms I have specified in this form.	<input type="checkbox"/>
10.	I agree to the use of direct quotations in publications provided that my anonymity is preserved.	<input type="checkbox"/>
11.	I understand what I have said or written as part of this project will be used in reports, publications and other research outputs.	<input type="checkbox"/>
12.	I, along with the Researcher, agree to sign and date this informed consent form.	<input type="checkbox"/>

Participant: Name

Date

Researcher: Name

Date