

Project no

# TITLE OF THE PROJECT

## Consent form

**Title of Project:** [Remove any of the points below which do not apply to your project if you wish, or add additional lines if required, renumbering as appropriate]

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*The participant should complete the following part of this sheet him/herself*

please delete  
as necessary

1. Have you read the Participant Information Sheet?	YES/NO
2. Have you received enough information about the study?	YES/NO
3. Do you consent to be audio taped/video taped/photographed as detailed in the Participant Information Sheet?	YES/NO
4. Do you understand that you do not need to take part in the study and if you do enter you are free to withdraw:-  * at any time  * without having to give a reason for withdrawing  * and without detriment to you?	YES/NO
5. Do you agree to take part in this study?	YES/NO

**Name of participant:** ..... **Signed:** ..... **Date:** .....

**Name of researcher:** ..... **Signed:** ..... **Date:** .....

Do you consent for the audio tapes/video tapes/ photographs to be retained and used for future studies?	YES/NO
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**Name of participant:** ..... **Signed:** ..... **Date:** .....

**Name of researcher:** ..... **Signed:** ..... **Date:** .....