**Research Participant Consent Form**This template should be adapted to the needs of the particular study. The version adapted must be approved by your supervisor.

Title of Research Project:

Name of Researcher:

1. I confirm that I have read and understood the information sheet [ date and version number] for the study above. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
2. I agree to my data being anonymised and stored. I agree to it being shared in a relevant archive in this form.
3. I understand that my participation is voluntary. I also understand I am free to withdraw at any time- without giving any reason and without there being any negative consequences. I can decline to answer any particular question, or questions.
4. I agree that non identifiable quotes may be published in articles, used in conference presentations, or used for standard academic purposes such as assessment.
5. I agree to the interview being digitally audio recorded
6. I agree to the interview being digitally video recorded
7. I understand that the data collected during the study may be inspected by a supervisor from De Montfort University. I give permission for the supervisor to have access to my data.
8. I also acknowledge that if I am being interviewed this date may be transcribed by a third party, authorised by the university to undertake such duty.
9. I agree to take part in the above research project.

……………………………… ……………………. ……………………………

Print name of participant Date Signature

Please tick and initial all boxes if you agree

…………………………. ………………….. ………………………………..

Print name of person taking consent Date Signature

A copy of the signed and dated consent form should be placed with the project file which must be kept in a secure location.