**Exemplar Consent Form** (Form to be on headed paper)

**PARTICIPANT CONSENT FORM**

Reference Number:

Participant name or Study ID Number:

Title of Project:

Name of Researcher:

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**Participant to complete this section: Please initial each box**

1. I confirm that I have read and understand the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason.

1. I agree to take part in the above study.

The following statements could also be included on the consent form if appropriate:

1. I agree to the interview / focus group / consultation being audio recorded
2. I agree to the interview / focus group / consultation being video recorded
3. I agree to the use of anonymised quotes in publications

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Signature of participant Date

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Name of person taking consent Date

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Signature of person taking consent

Any information you provide will be treated in accordance with data protection principles for the purposes specified within the Participant Information Sheet. Cardiff Metropolitan University will process your personal data in line with Article 6(1)(a) and Article 9(2)(a) of the General Data Protection Regulation 2018 which specifies that your personal data can only be processed with your explicit consent. By signing this form and ticking the boxes above you are confirming that you have understood the reasons for obtaining your data and you are happy for the study to proceed. Please note that you have the right to withdraw consent at any point. Should you wish to invoke that right please contact [*insert contact details of relevant individual*]

*\* When completed, 1 copy for participant & 1 copy for researcher site file*