**Informed Consent for a 2-player Chess game Questionnaire**

|  |  |  |
| --- | --- | --- |
| **Please tick the appropriate boxes** | **Yes** | **No** |
| 1. **Taking part in the study** |  |  |
| I have read and understood the study information dated **DD/MM/YYYY**, or it has been read to me. I have been able to ask questions about the study and my questions have been answered to my satisfaction. | 🞏 | 🞏 |
| I consent voluntarily to be a participant in this study and understand that I can refuse to answer questions and I can withdraw from the study at any time, without having to give a reason. | 🞏 | 🞏 |
| I understand that taking part in the study involves answering questions regarding chess games, experience with chess, general chess knowledge.  The information will be gathered using a questionnaire with a mixture of multiple-choice questions, yes or no questions and some qualifying data which is written.  If there is a potential risk of participating in the study, then provide an additional statement:  I understand that taking part in the study has identified that there will be minimal risk in the participation form as it will be anonymised. | 🞏  🞏 | 🞏  🞏 |
| 1. **Use of the information in the study** |  |  |
| I understand that information I provide will be used for research at the University of the West of England and main point of contact will be Abdirahmaan Ibrahim.  Main point of contact is Abdirahmaan Ibrahim, [abdirahmaan2.ibrahim@live.uwe.ac.uk](mailto:abdirahmaan2.ibrahim@live.uwe.ac.uk)  Second point of contact is Dr Steve Battle, [Steve.Battle@uwe.ac.uk](mailto:Steve.Battle@uwe.ac.uk) | 🞏 | 🞏 |
| I understand that personal information collected about me that can identify me, such as my name or where I live, will not be shared beyond the study team.  This is to comply with our anonymised information receiving. | 🞏 | 🞏 |
| If you want to use quotes in research outputs, add: I agree that my information can be quoted in research outputs.  If you want to use named quotes, add: I agree that my real name can be used for quotes.  If written information is provided by the participant (e.g. diary), add: I agree to joint copyright of the right to data to the name of the researcher. | 🞏  🞏  🞏 | 🞏  🞏  🞏 |
| 1. **Future use and reuse of the information by others** |  |  |
| I give permission for the questionnaire that I provide to be deposited in the right data repository so it can be used for future research and learning.  Data will be deposited into the anonymised section. | 🞏 | 🞏 |
| 1. **Signatures** |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_  Name of participant [IN CAPITALS] Signature Date |  |  |
| For participants unable to sign their name, mark the box instead of signing  I have witnessed the accurate reading of the consent form with the potential participant and the individual has had the opportunity to ask questions. I confirm that the individual has given consent freely.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_  Name of witness [IN CAPITALS] Signature Date |  |  |
| I have accurately read out the information sheet to the potential participant and, to the best of my ability, ensured that the participant understands to what they are freely consenting.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_\_\_\_\_\_\_\_ \_\_  Name of researcher [IN CAPITALS] Signature Date |  |  |
| 1. **Study contact details for further information**   **Abdirahmaan Ibrahim, abdirahmaan2.ibrahim@live.uwe.ac.uk** |  |  |