

Consent form

Starting a new job in an office can be very stressful for an intern or a new employee especially if it is their first day in office. It takes time to learn what other employees' job is and how they can be beneficial for you and your adjustment. It might take some time for new members to learn the rooms and their purpose within the office building as well as to understand and learn on how to use certain equipment, for example a punch clock or simply a coffee machine. The application will guide the interns through a process adjusted just for them to get to know the people around them, the building and any relevant equipment which they might make use of on a day to day basis. It can also be used for any clients who might be visiting the office and might have never stepped foot inside. The application will provide some navigation to guide them through the building as well as information on every office. The main expected outcome is that the users will easily get adjusted to the workplace through a user-friendly immersive experience, provided by the augmented reality application.

Anyone who is willing to participate are presented with this form to either opt in or opt out without giving any reason behind their decision. All participants will remain anonymous and no data such as name, surname and age will be collected. The participation will involve of trying out the application and later filling in a survey form to evaluate how they found the application.

CONSENT FORM

Title of Project: **Workplace Assistant Augmented Reality**

Name of Researcher: **Gabriel Camilleri**

Please initial all boxes

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, without my medical care or legal rights being affected. ☐

3. I agree to take part in the above study. ☐

Name of Participant

Date

Signature

Name of Person
taking consent.

Date

Signature