

Organisational Consent Form

Assignment Description/Research Purpose

My name is ([add your name]) and I am studying for a [state your degree] at the University of Wolverhampton ([add School, Research Institute/Centre]) UK. As part of my degree I need to complete a project and I would like to use your organisation as the source of data. The research aims are:

[Given brief information about research and list aims]

Data Collection Procedures

To achieve the above aims the following data collection process(es) are being undertaken

[state data methods i.e. interviews, questionnaires, focus groups etc]

Ethical Concerns (Review and revise as necessary)

- **Permission Granted**

Researchers are required to complete an ethical approval process prior to data collection. They are to be granted permission through an authorisation letter from the organisation (from a confirmable source) granting permission for all relevant data access, facility use and use of personnel time for research purposes.

- **Potential Conflicts of Interest**

In order to avoid ethical complications, researchers are to avoid choosing their subordinate, their immediate supervisor or someone who is, or might become, their student. Additionally, they are to consult their organisation's requirements for ethical approval of research.

- **Confidentiality**

In all cases, organisational information will be anonymised, no proprietary information will be shared outside of the research and the privacy of the interviewee will be safeguarded and only made known to university officials. Additionally, no results of the research will be made publically available without specific approval from the organisation and the interviewee.

- **Data Security**

The collection, storage and other processing of data will comply with the University of Wolverhampton Data Protection Policy and the related documents referred to therein as well as all relevant legislative provision.

- **Reasonably Foreseeable Risks and Anticipated Benefits and Costs to Participant or Others**

There are no foreseeable risks by way of physical or psychological harm to the participant or to others in the organisation.

Contact Details

- **My contact details are:**

[Contact details, including telephone, email and work address]

- **The contact details of my supervisor at the University of Wolverhampton (add School, Research Institute/Centre) are:**

Please keep/print a copy of this organisational consent sheet for your reference. Please contact me and/or the supervisor at the University of Wolverhampton with any question or concerns you may have.

Researcher

Date

Signature

Organisational Representative

Date

Signature

Name:

Title:

Address:

Telephone number

Email address