**CONSENT FORM FOR PARTICIPANTS IN RESEARCH PROJECTS**

Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research

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| --- | --- | --- |
| **Title of project:** Interaction in a youth community centre following the COVID-19 pandemic | | |
| **Ethical review reference number:** | **Version number:** 1 04/08/2020 | |
|  | | Tick or initial |
| 1. I confirm that I have read and understood the information sheet dated 04/08/2020for the above project. I have had the opportunity to consider the information and asked questions which have been answered to my satisfaction. | |  |
| 1. I consent voluntarily to be a participant in this project and understand that I can refuse to take part and can withdraw from the project at any time without having to give a reason. | |  |
| 1. I consent to the processing of my personal information for the purposes explained to me in the Information Sheet. I understand that such information will be handled in accordance with the terms of the General Data Protection Regulation (GDPR) and the UK Data Protection Act 2018. | |  |
| 1. I understand that my information may be subject to review by responsible individuals from the College for monitoring and audit purposes. | |  |
| 1. I understand that it will not be possible to identify me in any research outputs. | |  |
| 1. **To consent to observation**: I consent to my interactions at centre X being observed. | |  |
| 1. **To consent to the interview:** I consent to my interview being audio recorded. | |  |
| 1. **To consent to the interview:** I agree to my data being shared with a third-party transcriber who will have signed a confidentiality agreement. | |  |
| 1. I understand that I must not take part if they fall under the exclusion criteria as detailed in the information sheet and explained to me by the researcher. | |  |
| 1. I understand that the information that I submit will be published as a report and used in academic presentations. | |  |

Signed: Date: