CONSENT FOR PARTICIPATION

An Exploration of Barriers Hindering Girls' Education in the Nuba Mountains (Sudan)

You are invited to participate in a research study conducted by RESALA RASHID AYOUB a student researcher from the African Leadership University. This study is part of research pertaining to her final year Capstone Project/Research. Miss RESALA RASHID AYOUB will be interviewing and observing people who are impacted in the area of addressing the barriers that hinder girls' access to education in the Nuba Mountains, Sudan.

You are being asked to participate in the project because you are active in or familiar with one or more aspects of this study. Please read (or read to study participant) the information below and ask questions about anything you do not understand before deciding to participate in the study:

- Participation is voluntary: You have the right to withdraw from this project at any stage and are under no obligation to take part. You have the right to refuse to answer any questions;
- Compensation: You understand you will not be compensated for participation unless you need to be refunded for expenditure incurred in the process of participating in the study.
- Academic research and publications: Your responses will be used solely for education and research purposes, which may be used in academic publications. This report will be available to you if you desire for comment prior to finalisation as to allow your response to be included in any published work.
- Privacy: We would like permission to indicate your name and position/title in any publications where direct quotations or references to information you provide during this interview are used. If you do not grant permission, only the name of your department or organization and a generic position title will be used. Your name and actual position title will remain confidential.
- Interviews: In the instance where a one-on-one interview is requested to delve deeper into your perspective of an issue, you understand that you do not have to participate. If you do agree, you can decide whether or not to have the interview recorded (audio and/or visual).

Participation Permission					
I agree to participate in the study.			I do not agree to participate.		
Identity Disclosure: In the event of publications, I give permission to indicate:					
My name	My position title	Phone (mobile) number		None	
Interviews - Recording Permission (audio-visual)					
I give permission to be recorded I do			not give permission to be recorded		

By signing below, you are indicating that you understand the procedures described above, your questions have been answered to your satisfaction, and that you have seen and approved a copy of this form. If you agree to participate in this study, please indicate below the conditions that apply:

Participant Name: _Sabir W	/alid Abdurahman
Signature:	
Date: 6/27/2025	Time: 12:15 AM