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| CONSENT FORM WHERE PERSONAL DATA IS COLLECTED |
| Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Principal Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student ID No. (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| *Please tick or initial where applicable -* |
| I have carefully read and understood the Participant Information Sheet. | | 🞐 |
| I have had an opportunity to ask questions and discuss this study and I have received satisfactory answers. | | 🞐 |
| I understand I am free to withdraw from the study at any time, without having to give a reason for withdrawing, and without prejudice. | | 🞐 |
| I agree to take part in this study. | | 🞐 |
| I also consent to the retention of this data under the condition that any subsequent use also be restricted to research projects that have gained ethical approval from Northumbria University. | | 🞐 |

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| Name/Signature of participant....................................................... Date.....……………….. |
| Signature of Parent / Guardian in the case of a minor........................................... |