

Consent Form

Project	t title:	Class research project: Comp719
Project	t Supervisor:	Dr Robert Wellington
Resear	cher: Andre Cov	vie, Ben Smith, Ben Son
0	I have read and understood the information provided about this research project in the Information Sheet dated 16/10/2017.	
0	I have had an opportunity to ask questions and to have them answered.	
0	I understand that notes will be taken during the interviews and that they will also be audio-taped and transcribed.	
0	I understand that I will be recorded on video, but that this is then analysed and my face or any distinguishing features will not be used in any publication. The video tapes will be then be stored in a locked cupboard in the office of the School of Engineering Computing and Mathematical Sciences.	
0	I understand that taking part in this study is voluntary (my choice) and that I may withdraw from the study at any time without being disadvantaged in any way.	
0	I understand that if I withdraw from the study then I will be offered the choice between having any data that is identifiable as belonging to me removed or allowing it to continue to be used. However, once the finding have been produced, removal of my data may not be possible.	
0	I agree to take par	t in this research.
0	I wish to receive a	summary of the research findings (please tick one): YesO NoO
Participa	ant's signature:	
Participa	ant's name:	
Participa	ant's Contact Detail	ls (if appropriate):
Date:		
Annrow	ad by the Auckland	University of Technology Ethics Committee on 11th August 2016, AUTEC Reference number

16/275.