



PARTICIPANT CONSENT FORM

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

Title of Study:

Immersive Mixed Reality Experiments

Department:

Computer Science

Name and Contact Details of the Researcher(s):

Andrei Bunea, andrei.bunea.22@ucl.ac.uk

Name and Contact Details of the Principal Researcher:

Anthony Steed, a.steed@ucl.ac.uk

Name and Contact Details of the UCL Data Protection Officer:

Alexandra Potts, data-protection@ucl.ac.uk

This study has been approved by the UCL Computer Science Research Ethics Committee: Project ID number: UCL/CSREC/R/16

Thank you for considering taking part in this research. The person organising the research must explain the project to you before you agree to take part. If you have any questions arising from the Information Sheet or explanation already given to you, please ask the researcher before you decide whether to join in. You will be given a copy of this Consent Form to keep and refer to at any time.

I confirm that I understand that by ticking/initialling each box below I am consenting to this element of the study. I understand that it will be assumed that unticked/initialled boxes means that I DO NOT consent to that part of the study. I understand that by not giving consent for any one element that I may be deemed ineligible for the study.

		Tick Box
1.	I confirm that I have read and understood the Information Sheet for the above study. I have had an opportunity to consider the information and what will be expected of me. I have also had the opportunity to ask questions which have been answered to my satisfaction.	
2.	I understand that I will be able to withdraw my data up to seven days after study end.	
3.	I consent to participate in the study. I understand that my personal information (i.e. name, age, gender) will be used for the purposes explained to me. I understand that according to data protection legislation, 'public task' will be the lawful basis for processing.	
4.	I understand that all personal information will remain confidential and that all efforts will be made to ensure I cannot be identified except as required by law. I understand that my data gathered in this study will be stored anonymously and securely. It will not be possible to identify me in any publications.	
5.	I understand that my information may be subject to review by responsible individuals from the University for monitoring and audit purposes.	
6.	I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason. I understand that if I decide to withdraw, any personal data I have provided up to that point will be deleted unless I agree otherwise.	

7.	I understand the potential risks of participating and the support that will be available to me should I become distressed during the course of the research.	
8.	I understand the direct/indirect benefits of participating.	
9.	I understand that the data will not be made available to any commercial organisations but is solely the responsibility of the researcher(s) undertaking this study.	
10.	I understand that I will not benefit financially from this study or from any possible outcome it may result in in the future.	
11.	I understand that I will be paid £0 and that I will still be entitled to this if I choose to withdraw.	
12.	I agree that my anonymised research data may be used by others for future research. No one will be able to identify you when this data is shared.	
13.	I understand that the information I have submitted will be published as a report and I wish to receive a copy of it. Yes/No	
14.	I consent to my interview being audio recorded and understand that the recordings will be destroyed within 14 days after the data has been collected, following transcription.	
15.	I hereby confirm that I understand the inclusion criteria as detailed in the Information Sheet and explained to me by the researcher.	
16.	I hereby confirm that: (a) I understand the exclusion criteria as detailed in the Information Sheet and explained to me by the researcher; and (b) I do not fall under the exclusion criteria.	
17.	I agree that my GP may be contacted if any unexpected results are found in relation to my health.	
18.	I have informed the researcher of any other research in which I am currently involved or have been involved in during the past 12 months.	
19.	I am aware of who I should contact if I wish to lodge a complaint.	
20.	I voluntarily agree to take part in this study.	
21.	I would be happy for the data I provide to be archived. I understand that other authenticated researchers will have access to my anonymised data.	

If you would like your contact details to be retained so that you can be contacted in the future by UCL researchers who would like to invite you to participate in follow up studies to this project, or in future studies of a similar nature, please tick the appropriate box below.

<input type="checkbox"/>	Yes, I would be happy to be contacted in this way	
<input type="checkbox"/>	No, I would not like to be contacted	

Name of participant

Date

Signature

Researcher

Date

Signature