

Participant ID no:
*Do not include box for
anonymised samples*

CONSENT FORM

Title of research project: **Developing an absolute beginner friendly Capture The Flag platform**

SREC reference and committee: COMSC/Ethics/2023/050

Name of Chief/Principal Investigator: Jake Mcneill

**Please
initial box**

I confirm that I have read the information sheet dated 2023-03-03 version 001 for the above research project.	
I confirm that I have understood the information sheet dated 2023-03-03 version 001 for the above research project and that I have had the opportunity to ask questions and that these have been answered satisfactorily.	
I understand that my participation is voluntary and I am free to withdraw at any time without giving a reason and without any adverse consequences (e.g. to medical care or legal rights, if relevant). I understand that if I withdraw, information about me that has already been obtained may be kept by Cardiff University.	
I understand that data collected during the research project may be looked at by individuals from Cardiff University or from regulatory authorities, where it is relevant to my taking part in the research project. I give permission for these individuals to have access to my data.	
I consent to the processing of my personal information (name, email address and any information you choose to disclose in questionnaire answers) for the purposes explained to me. I understand that such information will be held in accordance with all applicable data protection legislation and in strict confidence, unless disclosure is required by law or professional obligation.	
I understand who will have access to personal information provided, how the data will be stored and what will happen to the data at the end of the research project.	
I understand that anonymised excerpts and/or verbatim quotes from my questionnaire or interview may be used as part of the research publication.	
I agree to only interact with systems I am authorised to do so during the study and I understand that this will be outlined to me before the CTF begins.	

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I understand how the findings and results of the research project will be written up and published.	
I agree to take part in this research project.	

Name of participant (print)_____
Date_____
Signature_____
Name of person taking consent
(print)_____
Date_____
Signature_____
Role of person taking consent
(print)

THANK YOU FOR PARTICIPATING IN OUR RESEARCH
YOU WILL BE GIVEN A COPY OF THIS CONSENT FORM TO KEEP