## Consent Form

Please read and sign this form.

I agree to participate in a feedback session study conducted and recorded by the Ad Hoc, LLC research team acting on behalf of the Department of Veterans’ Affairs. During the session I will be interviewed about my experience and willingness to work with the VA as well as my interest in integrating with VA APIs. This feedback session will take about 45-60 minutes.

If you don’t want us to record this session, please (initial here\_\_\_\_\_\_)

If you would prefer to give feedback anonymously please (initial here\_\_\_\_\_\_)

I understand that the information and recording is for research purposes only and that my name and image will not be used for any other purpose. I relinquish any rights to the recording and understand the recording may be copied and used by the Ad Hoc Research Team without further permission.

I understand that participation in this usability study is voluntary and that I may quit the session at any time. I agree to immediately raise any concerns or questions during the session with the moderator.

By initialing below and signing this form, I give my permission for the Ad Hoc Research team to use:

•Written notes of verbal statements (initial here \_\_\_\_\_\_)

•Recorded voice (initial here \_\_\_\_\_\_)

•Recorded video or computer screen share (initial here \_\_\_\_\_\_)

Please sign below to indicate that you have read and you understand the information on this form and that any questions you might have about the session have been answered.

If you have any questions after today, please contact lead researcher, Lindsay Ferris, at [lindsay@adhocteam.us](mailto:lindsay@adhocteam.us).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Print name Signature Date