CONSENT FORM

Title of Study: Food Recipe Generator: an APP with Recipe1M+ to recognise dishes recipes from images

IRAS Project ID: CS-2022-COMP3003-20215622

Name of Researcher: Yichen Lu

Name of Participant: **Please initial box**

1. I confirm that I have read and understand the information sheet version number XXX dated XXX for the above study and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, and without my medical care or legal rights being affected. I understand that should I withdraw then the information collected so far cannot be erased and that this information may still be used in the project analysis.

3. I understand that relevant sections of my data collected in the study may be looked at by authorised individuals from the University of Nottingham, the research group and regulatory authorities where it is relevant to my taking part in this study. I give permission for these individuals to have access to these records and to collect, store, analyse and publish information obtained from my participation in this study. I understand that my personal details will be kept confidential.

4. (If appropriate) I understand that the information collected about me will be used to support other research in the future and may be shared anonymously with other researchers.

5. I agree to take part in the above study.

_____   _____   _____
Name of Participant   Date   Signature

_____   _____   _____
Name of Person taking consent   Date   Signature

3 copies: 1 for participant, 1 for the project notes and 1 for the medical notes (as apporporiate)