

## Informed Consent Form for Minor Research Participants

Study Information Sheet: <https://hssrpstudy-emotional-resonance.web.app/sis.pdf>

I voluntarily consent to take part in this research study. I have fully read, discussed, and understood the purpose and procedures of this study as stated in the Study Information Sheet attached to this consent form. My questions concerning the study have been answered to my satisfaction, and I acknowledge that I am participating in this study of my own free will.

I understand that I may withdraw my consent and stop participating in the study at any time without giving any reasons, and without penalty.

By participating in this research study, I confirm that I consent to the collection, use and disclosure of my Personal Data for the purposes set out in the Study Information Sheet.

I agree that I will be contacted for **additional consent**, including but not limited to changes in the proposed research, serious adverse events that would lead to a change in the proposed research, and any other circumstances which is specific to this research study.

**NOTE:** By signing this consent form, you agree that research data (which cannot be used to re-identify you) can be used in the study's publication, and that includes putting it on the Digital Repository of NTU (DR-NTU).

### Participant Information

_____	_____	_____
Name of Participant	Signature	Date

### Parent / Legal Guardian / Legally Acceptable Representative (LAR) Information

_____	_____	_____
Name of LAR	Signature	Date

### Investigator / Person Administering Consent – Statement

Consent administered by: <https://hssrpstudy-emotional-resonance.web.app/> electronically  
No signature is required