



MONASH
University

Department of Software Systems and Cybersecurity

Monash University
Clayton Campus, Wellington Rd, Clayton VIC 3800, Australia.

CONSENT FORM

Manager

THIS FORM WILL BE HELD FOR A PERIOD OF 6 YEARS

Project Title:	Understanding Requirements Changes in Software Development
Name of Principal Investigator/ Supervisor:	Rashina Hoda
Name of Co-Investigator/ Supervisor:	John Grundy
Name of Student Researcher:	Kashumi Madampe

I have read the Explanatory Statement, have understood the nature of the research and why my organization has been selected. I have had the opportunity to ask questions and have had them answered to my satisfaction.

- I agree for my organisation to take part in this research for researcher to conduct interviews with employees.
- I grant/ do not grant permission to the researcher to access the organization's facilities for the purpose of observations.
- I grant/ do not grant permission to the researcher to access the organization's facilities for the purpose of conducting interviews.
- I grant/ do not grant permission to the researcher to access organization's software repositories for the purpose of mining data.
- I assure that participation or non-participation will not affect the employment status/ grades of the participants, the participant's relationship with the organization or access to its services.
- I wish / do not wish to receive the summary of findings.
- I understand that data will be kept for 6 years, after which they will be destroyed.

Name: _____

Signature: _____

Date: _____

Approved by the Monash University Human Research Ethics Committee on 27th May, 2020 for five years. Reference Number: 23578.