

RESEARCH PARTICIPANT CONSENT FORM

TITLE OF RESEARCH PROJECT: Designing a Paint Application Layer System for Eye Tracking Systems

RESEARCHER(S): Ciaran O'Dwyer

PARTICIPANT DETAILS:

Name: Lynda Walker
Address:

Telephone:
DOB (if under 18 years of age):

PROJECT DATES: July 2019 – September 2019

PARTICIPANT DECLARATIONS:

Please delete as applicable

- I have been informed of and understand the purposes of the research ☒ YES / ☐ NO
- I have been given an opportunity to ask questions ☒ YES / ☐ NO
- I understand that any information which might potentially identify me will not be used in any published material (without my prior consent) ☒ YES / ☐ NO
- I understand that I may request access to any data collected by the researcher(s) that relates to me: ☒ YES / ☐ NO
- I agree to participate in the study as outlined ☒ YES / ☐ NO
- I understand I may withdraw at any time "without prejudice" ☒ YES / ☐ NO

Date: 29/7/19

Signature:

