RESEARCH PARTICIPANT CONSENT FORM

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

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| RESEARCHER(S): Ciaran O'Dwyer | | |
| PARTICIPANT DETAILS: | | |
| | Name: Charlotte Stavelly 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: | Signature: CASta | elly |