



Sterio — Usability Testing
Informed Consent Form

Start press Enter ↵

“ You are invited to take part in a research study supported by the Interactive Technologies Institute of the Laboratory of Robotics and Systems in Engineering and Science (**ITI-LARSys**) and Instituto Superior Técnico (**IST**).

Please **read this form carefully** and ask any questions you may have before agreeing to take part in this study.

If you have questions, you may contact the Principal Investigator at miguelregouga@tecnico.ulisboa.pt.

Continue press Enter ↵

“ This study was conducted within my thesis to obtain a master’s degree course in Computer Science and Engineering at Instituto Superior Técnico.

All the data written here will be completed **anonymously** and will not be used for anything other than **academic purposes**.

After its proper use, the data hereby introduced will be **destroyed**.

Continue press Enter ↵

“ The purpose of this study is to **get feedback** on the usability of a new platform that aims to combine the best features of **music streaming services** and **traditional terrestrial radio** into an integrated and personalized experience that may be **shared** within small networks of friends and family.

Continue press Enter ↵

“ Upon accepting to participate in this study, you will be asked to perform **3 tasks** and to give feedback on your experience.

No task requires previous experience or specific knowledge of the area.

Continue press Enter ↵

“ There is no risk or benefit in participating in this study.

At the end of the test, regardless of the results, you will be entitled to a thank you gift for participating.

Continue press Enter ↵

“ All data collected will be kept private. Only those responsible for the project will have access to them.

Continue press Enter ↵

“ Being part of this study is a voluntary act. You can skip any task you don't want to perform or questions you prefer not to answer.

If you decide not to participate, your relationship (current or future) with IST and/or ITI-LARSyS will in no way be affected.

If you decide to participate, you are free to withdraw at any time.

Continue press Enter ↵

“ The facilitator for this study is called **Miguel**. Please ask any questions you may have now.

Any questions / suggestions you may have later can be sent to the address miguelregouga@tecnico.ulisboa.pt.

Continue press Enter ↵

1 → I, the undersigned, confirm that:
(please answer as appropriate)

Continue press Enter ↵

a. I have read and understood the information about the research project, as provided in the Information. *

☒ Yes

☐ No

b. I have been given the opportunity to ask questions about the project and my participation. *

☐ Y Yes

☐ N No

c. I voluntarily participate in the project. *

☐ Y Yes

☐ N No

d. I understand I can withdraw my participation at any time without providing reasons.

I will not be penalized for withdrawing or questioned about the reasons of my withdrawn.

Upon withdrawing, I understand that my data will be destroyed. *

☐ Y Yes

☐ N No

e. I understand my real name will **NOT** be collected, nor will it be used in reports, publications and other research outputs.

No metadata will be collected so that nothing I have contributed to this project can be recognized and/or traced back to me/my organization. *

☐ Y Yes

☐ N No

f. The procedures regarding confidentiality have been clearly explained (*i.e., data anonymization, use of names and pseudonyms, ‘no metadata’ policy, no release to third parties*). *

☐ Y Yes

☐ N No

g. The use of the data in research, publications, sharing and archiving has been explained to me. *

☐ Y Yes

☐ N No

h. I understand that other researchers will have access to this data only if they agree to the terms I have specified in this form. *

☐ Y Yes

☐ N No

i. I understand that it is my right to sign this consent form with a pseudonym of my choice. *

☐ Y Yes

☐ N No

j. I consent to this interaction being recorded for research purposes only. *

☐ Y Yes

☐ N No

k. I, along with the Researcher, agree to sign and date this informed consent form. *

☐ A I accept

☐ B I don’t accept

2→ Please enter your name. *

Your name will not be shared with third-parties nor taken into account in the ambit of the study.

You may use a pseudonym of your choice.

Type your answer here...

3→ Please enter the date you're signing this form. *

DD / MM / YYYY