



THE UNIVERSITY OF
SYDNEY

Usability Engineering Class (COMP5427)
School of Information Technologies
University of Sydney, 2006
Date: September, 2015

**Participant Consent Form
E-Textbook Usability Evaluation Project**

I, Derek , give consent to participate in the project.

"E-Textbook Usability Evaluation Project"

In giving my consent I acknowledge that:

1. The procedures required for the project and the time involved have been explained to me, and any questions I have about the project have been answered to my satisfaction.
2. I have read the Participant Information Sheet and have been given the opportunity to discuss the information and my involvement in the project with the researcher/s.
3. I understand that I can withdraw from the study at any time, without affecting my relationship with the researcher(s) now or in the future.
4. I understand that my involvement is strictly confidential and no information about me will be used in any way that reveals my identity.

Signed: Derek
Name: Derek
Date: 2015. 8. 25



VIDEO RECORDING CONSENT FORM

TITLE: E-Textbook Usability Evaluation

To assist our **E-Textbook Usability Evaluation** project, you can indicate whether we may use still image, video and/or audio information collected from the experiment for publication in a report. This is voluntary, and you may specify that you wish your features to be anonymised. If this section is blank, we will assume 'No' for all responses.

I hereby give consent for the following (please the appropriate box in each row):

	Yes	Yes	No
if anonymised			
Use of the video + audio recordings as teaching resource	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Use of my still image for reports and publications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Use of my image in video (no audio) for reports and publications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Use of my recorded audio for reports and publications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Signed: Derek

Name: Derek

Date: 2015. 8-15