CONSENT FORM

THIS FORM WILL BE HELD FOR A PERIOD OF 6 YEARS

Project Title: Understanding the effect of programming expertise on code review task outcomes
Name of Investigator(s)/Supervisor(s): Associate Professor Ewan Tempero and Dr. Kelly Blincoe
Name(s) of Researcher(s): Ms. Sanuri Gunawardena

I have read the Participant Information Sheet, have understood the nature of the research and why I have been selected. I have had the opportunity to ask questions and have had them answered to my satisfaction.

- I understand that anonymity cannot be guaranteed in this experiment.
- I agree to take part in this code review experiment. I have the right to withdraw at any time without giving reason.
- I give my permission for my screen and my voice to be recorded while I'm participating in the experiment. I understand that recording cannot be stopped during the study because the recording is necessary for the study. I also provide my permission to record the time I spend on each task.
- I have read and understood the content of the PIS.
- I have been given a copy of the Participant Information Sheet and this completed consent form for my records.
- As an appreciation of my time spent on the experiment, I understand that I will receive a 50NZD gift card by post, within a week of my participation in the experiment. I understand that I also have an opportunity to decline payment or seek recompense in an equivalent or culturally appropriate manner, such as a koha payment to an iwi.

Name: _____

Signature_____ Date: _____