



CONSENT FORM

Title of research project: A Survey-Based Study to Develop a Corpus of Natural Language Queries for Smart Building Interaction

SREC reference and committee: COMSC/Ethics/2025/044

Name of [Chief/Principal Investigator] [lead researcher]: Suhas Devmane

Please initial box

I confirm that I have read the information sheet dated 24/11/2025 version 1.1 for the above research project. ☒

I confirm that I have understood the information sheet dated 24/11/2025 version 1.1 for the above research project, and that I have had the opportunity to ask questions and that these have been answered satisfactorily. ☒

I understand that my participation is voluntary, and I am free to withdraw at any time without giving a reason and without any adverse consequences (e.g. to medical care or legal rights, or my course/degree progression, if relevant). I understand that if I withdraw, information about me that has already been obtained will be removed and I will be confirmed the deletion. ☒

I understand that data collected during the research project may be looked at by individuals from Cardiff University or from regulatory authorities, where it is strictly necessary and/or relevant to my taking part in the research project. ☒

I understand that my personal information if found anywhere such as consent forms, will be processed for the purposes explained to me, as set out in the information sheet. I understand that such information will be held in accordance with all applicable data protection legislation and in strict confidence, unless disclosure is required by law or professional obligation. I have been informed of my rights under data protection legislation and how I can raise any concerns. ☒

I understand who will have access to any personal information provided, how it will be managed, and what will happen to the data at the end of the research project. ☒

I understand that excerpts and/or verbatim quotes from any submitted questions/responses may be used as part of the research publication but that I will not be identified/identifiable. ☒

I understand how the findings and results of the research project will be written up and published. ☒

I agree to take part in this research project. ☒

Name of participant (print) Suhas **Date** 02/12/2025

Signature _____ **Suhas**

Name of person taking consent (print) Suhas Devmane **Date** 02/12/2025

Signature _____ **Suhas Devmane**

Role of person taking consent (print) Lead researcher

THANK YOU FOR PARTICIPATING IN OUR RESEARCH
YOU WILL BE GIVEN A COPY OF THIS CONSENT FORM TO KEEP