

## CONSENT FORM

**Title of Study: Requirement based academic matchmaking platform for academic institutes**

**Lead researcher:** TMTCB Thennakoon

I have been given the Participation Information Sheet and/or had its contents explained to me. Yes ☐ No ☐

I have had an opportunity to ask any questions and I am satisfied with the answers given. Yes ☐ No ☐

I understand I have a right to withdraw from the research at any time and I do not have to provide a reason. Yes ☐ No ☐

I understand that if I withdraw from the research any data included in the results will be removed if that is practicable (I understand that once anonymised data has been collated into other datasets it may not be possible to remove that data). Yes ☐ No ☐

I would like to receive information relating to the results from this study. Yes ☐ No ☐

I wish to receive a copy of this Consent form. Yes ☐ No ☐

I confirm I am willing to be a participant in the above research study. Yes ☐ No ☐

I note the data collected may be retained in an archive and I am happy for my data to be reused as part of future research activities. I note my data will be fully anonymised (if applicable). Yes ☐ No ☐

**Participant's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This consent form will be stored separately from any data you provide so that your responses remain anonymous.

\_\_\_\_\_  
I confirm I have provided a copy of the Participant Information Sheet approved by the Research Ethics Committee to the participant and fully explained its contents. I have given the participant an opportunity to ask questions, which have been answered.

**Researcher's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PARENTAL/CARER ASSENT FORM**

*[Drafting note: If the parent/carer will be present during the interaction with the child/young person then it may be possible to include the parental/carer assent in the main Consent Form]*

**Title of Study:** Requirement based academic matchmaking platform for academic institutes

**Lead researcher:** TMTCB Thennakoon

I have read the information in the Participation Information Sheet, a copy of which has been given to me, and I provide my assent for:

**Child/Young Person's Name:** \_\_\_\_\_

who is under the age of 18 years and in my care, to participant in the above research study.

I understand both I and the participant named above have a right to withdraw from the research at any time and for any data included in the results to be removed if that remains practicable (i.e. once anonymised data has been collated into datasets it may not be possible to remove that data)

**Parent/Carer's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This assent form will be stored separately from any data provided by the participant to protect their anonymity.