goldsmiths_logo_20pc

Informed consent form

This is a *template* devised by the UK Data Service to assist researchers in the design of their informed consent form. You may adapt this template to the requirements of your particular project, using the notes and suggestions provided.

**The informed consent form should always be accompanied by a Participant Information Sheet [see Goldsmiths guidelines]**

**Informed Consent for A System to Develop Smarter Gyms & Improve User Experience In The Gym Through NFC Technology**

|  |  |  |
| --- | --- | --- |
| **Please tick the appropriate boxes** | **Yes** | **No** |
| 1. **Taking part in the study** |  |  |
| I have read and understood the study information dated **[**05/12/2022**]**, or it has been read to me. I have been able to ask questions about the study and my questions have been answered to my satisfaction. | 🞏 | 🞏 |
| I consent voluntarily to be a participant in this study and understand that I can refuse to answer questions and I can withdraw from the study at any time, without having to give a reason.  Goldsmiths addition:  I understand that if I do decide to withdraw, anonymised data can no longer be removed from the study after [16/12/2022]. | 🞏  🞏 | 🞏    🞏 |
| I understand that taking part in the study involves written notes taken by an enumerator of feedback/answers or a survey/questionnaire completed by the enumerator. | 🞏 | 🞏 |
| 1. **Use of the information in the study** |  |  |
| I understand that information I provide will be used for reports, publications, website. | 🞏 | 🞏 |
| I understand that personal information collected about me that can identify me, such as my name or where I live, will not be shared beyond the study team. | 🞏 | 🞏 |
| I agree that my information can be quoted in research outputs.  I agree that my real name can be used for quotes. | 🞏  🞏 | 🞏  🞏 |
| 1. **Future use and reuse of the information by others** |  |  |
| I give permission for the data/information that I provide to be deposited in **Kaggle,** **UCI Machine Learning Repository, Data.gov, and Google Dataset Search** so it can be used for future research and learning. | 🞏 | 🞏 |

|  |  |  |
| --- | --- | --- |
| 1. **Signatures** |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_  Name of participant [IN CAPITALS] Signature Date |  |  |
| For participants unable to sign their name, mark the box instead of signing  I have witnessed the accurate reading of the consent form with the potential participant and the individual has had the opportunity to ask questions. I confirm that the individual has given consent freely.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_  Name of witness [IN CAPITALS] Signature Date |  |  |
| I have accurately read out the information sheet to the potential participant and, to the best of my ability, ensured that the participant understands to what they are freely consenting.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_\_\_\_\_\_\_\_ \_\_  Name of researcher [IN CAPITALS] Signature Date |  |  |
| 1. **Study contact details for further information**   Thomas McAloon  07539 255 355  tmcal001@gold.ac.uk |  |  |