Example: Consent Form for [Insert Research Participant Group]

This is an example of an informed consent form for a research study. The statements provided on this form are not exhaustive. You may need to amend the statements or add statements according to your research study.

Title of Study: _____

For research involving the NHS:
IRAS ID: _____
Participant ID: _____

Thank you for your interest in taking part in this research. Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research study. You will be given a copy of this Consent Form.

		Please initial box to confirm consent
1.	I confirm that I have read the information sheet dated *[insert date]* (version *[insert version]*) for the above study, I have had the opportunity to consider the information, ask questions and I have had any questions answered satisfactorily.	
2.	I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, *[without my medical care or legal rights being affected]*. I understand that if I decide to withdraw, any data that I have provided up to that point will be *[specify whether data will be omitted or included]*.	
3.	I consent to the processing of my personal information *[specify what personal information will be collected]* for the purposes of this research study, as described in the information sheet dated *[insert date]* (version *[insert version]*).	
4.	I consent to my *[anonymised/pseudonymised]* research data being stored and used by others for future research.	
5.	I understand that my research data may be published as a report.	
6.	(If appropriate) I consent to the retention of my personal information *[specify what personal information will be collected]* for X weeks, for the purpose of being re-contacted.	
7.	(If appropriate) I understand that my research data may be looked at by individuals from *[insert company/organisation/institution name(s)]*, where it is relevant to my taking part in this research.	
8.	(If appropriate) I consent to being *[audio and/or video]* recorded and understand that the recordings will be *[specify storage procedure: destroyed within X weeks after the data has been collected / destroyed immediately after transcription and/or stored anonymously on password-protected software and used for research purposes only]*. (If appropriate) I understand that being audio and/or video recorded is optional and therefore not necessary for my participation in this research.	
9.	I agree to take part in this research project.	
	Participant _____ _____ _____ *Name of participant* *Signature* *Date*	
	Researcher _____ _____ _____ *Name of researcher* *Signature* *Date*	