1 copy for participant: 1 copy for researcher

Participant Consent Form

Name of participant: _____

Participant Identification Number for this project: _____

Please initial the boxes

1. I confirm that I have read and understand the information sheet for this project and have been able to ask questions. ☐

2. I understand that taking part is voluntary and that I am free to withdraw at any time. I DO NOT have to give a reason and my legal rights and the support I/my relative receive from the hospice will NOT be affected. If I want to stop taking part in the research I can contact Julie directly or speak to a member of staff at the hospice. ☐

3. I understand that if at any point during the interview I feel upset or unwell, I can take a break or stop the interview. ☐

4. I agree that sound recordings can be made of the interviews, and that the purpose for which the material will be used has been explained to me in a way which I have understood. ☐

5. I understand that any information I give will be used for research purposes only, including research publications and reports. I give my permission for my contributions to be used for research-related work and presentations. ☐

6. I understand and am happy with how the researcher will protect my right to confidentiality and anonymity. ☐

7. I understand that everything that is stated here applies to my entire involvement with this research project and on each occasion I am interviewed. ☐

8. I give my permission to be contacted again within a three-year period. ☐

9. I agree to take part in the above research project. ☐

_____   _____   _____

Name of Participant   Date   Signature

_____   _____   _____

Researcher   Date   Signature

Use of Data: Participant Consent Form

Name of participant: _____

Participant Identification Number for this project: _____

Please initial the boxes

1. Julie has explained to me that an interview transcript is the typed out version of what me and Julie said during our interviews.
I confirm that I am happy for Julie to keep copies of my interview transcripts once the current research project I have taken part in has ended.
I understand that the transcripts which Julie will keep will be anonymised so that either now or in the future, I will not be able to be identified as the person talking in them.
I understand that Julie may use the information in the transcripts for future research projects and publications.
I am aware that the transcripts will NOT be destroyed 3 years after the project has ended, but all personal information about me, such as Julie's records of my name and address will be.

2. Julie has explained to me that she has been asked by the organisation which has funded her research if they can have copies of the interview transcripts produced during the research project to put in a computer-based archive run by the Economic and Social Data Service (ESDS).
I understand that this will mean that other researchers and teachers can look at interview transcripts which involve me and they can use the information to help them think about their own research and future projects.
I consent to an anonymised version of my interview transcripts to be deposited with this online data storage service and I am happy for them to be put in the archive. However I understand that this might not happen if the transcripts are not suitable.

_____   _____   _____
Name of Participant   Date   Signature

_____   _____   _____
Researcher   Date   Signature

Use of Data: Participant Consent Form

Name of participant: _____

Participant Identification Number for this project: _____

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I consent to an anonymised version of my interview transcripts to be deposited with this online data storage service and I am happy for them to be put in the archive. However I understand that this might not happen if the transcripts are not suitable.

_____   _____   _____

Name of Participant   Date   Signature

And on behalf of ____ (deceased relative) _____

_____   _____   _____

Researcher   Date   Signature

Use of Data: Participant Consent Form

Name of participant: _____

Participant Identification Number for this project: _____

Please initial the boxes you ARE HAPPY to agree to for your own interviews.

1. Julie has explained to me that an interview transcript is the typed out version of what me and Julie said during our interviews.
I confirm that I am happy for Julie to keep copies of my interview transcripts once the current research project I have taken part in has ended.
I understand that the transcripts which Julie will keep will be anonymised so that either now or in the future, I will not be able to be identified as the person talking in them.
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I consent to an anonymised version of my interview transcripts to be deposited with this online data storage service and I am happy for them to be put in the archive. However I understand that this might not happen if the transcripts are not suitable.

_____   _____   _____

Name of Participant   Date   Signature

I also give permission on behalf of ___ (deceased relative) ____ For point 1 and point 2. ☐
                                                                                                           For just point 1.   ☐
                                                                                                           For just point 2.   ☐
                                                                                                           For none of the points.   ☐

_____   _____   _____

Researcher   Date   Signature