**CONSENT FORM**

**for PARTICIPANTS**

**Research Project:** Name of Project entered here

I, ……………………………………………………………………….., have read the information contained in the Information Sheet for Participants and any questions I have asked have been answered to my satisfaction. Yes/No

I agree to participate in this activity, realising that I may withdraw at any time. Yes/No

I agree that research data gathered for the study may be quoted and published using a pseudonym. Yes/No

I agree to be identified in this research. Yes/No

I agree to having my interview audio recorded and transcribed. Yes/No

I would like to receive a copy of the transcription of the interview. Yes/No

I am 18 years of age or older. Yes/No

 …………………………….. ………………………….

 Participant Date

 …………………………….. ………………………….

 Researcher Date