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**PARTICIPANT CONSENT FORM**

Participant name :

Title of Project : Training in conducting user research

Name of Organisers : Prof. C. Santhosh Kumar & Prof. Gareth Loudon

**Participant to complete this section: Please initial each box.**

1. I confirm that I have read and understand the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason.

3. I agree to take part in the above study.

1. I agree to the interview being audio recorded
2. I agree to photographs being taken

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Signature of Participant Date

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Name of person taking consent Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of person taking consent

*\* When completed, 1 copy for participant & 1 copy for researcher site file*