# 

**KBS RESEARCH ETHICS COMMITTEE**

**Ethical Consent Section**: **Focus Groups**

I, the undersigned, declare that I am willing to take part in research for the project entitled

“*INSERT Name of Research Project*”.

* I declare that I have been fully briefed on the nature of this study and my role in it and have been given the opportunity to ask questions before agreeing to participate.
* The nature of my participation has been explained to me, and I have full knowledge of how the information collected will be used.
* I am aware that my participation in this study will be audio/video recorded and I agree to this. However, should I feel uncomfortable at any time I can request that the recording software be switched off.
* I am aware that such information may also be used in future academic presentations and publications about this study.
* I fully understand that there is no obligation on me to participate in this study.
* I fully understand that I am free to withdraw my participation without having to explain or give a reason, up to a period of two weeks after the data collection is completed.
* I know that I have been asked not to discuss the content of the focus group discussion, or the identity of its participants with anyone.
* I acknowledge that while the researcher has asked all focus groups participants to maintain confidentiality in the above manner, the researcher cannot guarantee that individual participants will adhere to this request.
* I acknowledge that the researcher does guarantee that they will not use my name or any other information, that would identify me in any outputs of the research.

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

Signature of participant Date

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

Signature of Investigator Date

# 

**KBS RESEARCH ETHICS COMMITTEE**

**Data Protection Consent Section**: **Focus Groups**

I, the undersigned, declare that I am freely giving specific, informed and an unambiguous consent to the University to process my Personal Data for the purposes of undertaking the research project entitled [insert name of research project].

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |

|  |  |
| --- | --- |
| **Yes** | **No** |
|  |  |
| 🞏 | 🞏 |

* I declare that I have read and fully understand the contents of the

Research Privacy Notice, which is appended at Appendix 1 of this Consent form and I explicitly consent to my personal data being processed in line with this Research Privacy Notice.

* I explicitly consent to the University contacting

|  |  |
| --- | --- |
| **Yes** | **No** |
|  |  |
| 🞏 | 🞏 |

me as part of current or similar future research and holding my contact details on its database for the purpose of contacting me.

|  |
| --- |
| **Signatures** |
| 1.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_  Name of participant [IN CAPITALS] Signature Date |
| For participants unable to sign their name, mark the box instead of signing  **2. Note: The form only needs to be witnessed in very specific circumstances e.g. if the person giving consent is unable to sign their name. The witness section may be omitted if this does not apply.**  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  3. |
| 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 |

**APPENDIX 1**

**RESEARCH PRIVACY NOTICE**