**CONSENT FORM**

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| **HREC Project Number:** |
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**Contact details**

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| Name | **Thellie Ponto** | **Dr. Heather Benson** |
| Position | PhD student | Supervisor |
| Telephone | 08-92661357  | 9266 2833 |
| Email | Thellie.ponto@postgrad.curtin.edu.au | H.Benson@curtin.edu.au |

* I have read the participant information sheet and I understand its contents.
* I believe I understand the purpose, extent and possible risks of my involvement in this project.
* I voluntarily consent to take part in this research project and I can withdraw at any time of the study without consequences.
* I have had an opportunity to ask questions and I am satisfied with the answers I have received.
* I understand that my data will be de-identified at all times to ensure my privacy.
* I understand that this project has been approved by Curtin University Human Research Ethics Committee and will be carried out in line with the National Statement on Ethical Conduct in Human Research (2007).
* I understand I will receive a copy of this Information Sheet and Consent Form.
* I do consent to the storage and use of my information in future ethically-approved research projects related to this study.

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| --- | --- |
| Participant Name |  |
| Participant Signature |  |
| Date |  |

Declaration by researcher: I have supplied an Information Sheet and Consent Form to the participant who has signed above, and believe that they understand the purpose, extent and possible risks of their involvement in this project.

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| --- | --- |
| Researcher Name |  |
| Researcher Signature |  |
| Date |  |