

**Faculty of Health**

***Title of Study: An evaluation of a brief attachment-based parenting program***

**Name of researcher:** Kathryn Baltrotsky, Professor Sandra Grace, Dr Joanne Bradbury and Dr Frances Doran

**Tick the box that applies, sign and date and return to [kate.baltrotsky@scu.edu.au](mailto:kate.baltrotsky@scu.edu.au)**

I agree to take part in the Southern Cross University research project specified above. Yes  No

I have read and fully understand the information that has been provided to me in the Participant Information Sheet Yes  No

I agree to be interviewed by the researcher. Yes  No

I agree to complete a survey asking me about my parenting, my child's behaviour and my well-being. Yes  No

I agree to participate responsibly in the on-line Zoom session as described in the participant information sheet. Yes  No

I agree that I will have access to the internet and a device with Zoom. Yes  No

I understand that my participation is voluntary, and I understand that I can cease my participation at any time. Yes  No

I understand that my data collected in this research will be treated with privacy and confidentiality. Yes  No

I understand that no identifying information about me will be disclosed or published. Yes  No

I understand that all information gathered in this research will be kept safely and securely at Southern Cross University for a minimum of 5 years after publication. Yes  No

I consent to allow the data collected in this research to possibly be used in future research. Yes  No

I am aware that I can contact the researchers at any time with any queries. Their contact details are provided to me. Yes  No

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I understand that this research project has been approved by the SCU Human Research Ethics Committee.

Yes  No

I agree that the interview can be video recorded.

Yes  No

I understand that I can ask for the recording to be paused at any time I wish to say something 'off the record'.

Yes  No

**Participant's name:** \_\_\_\_\_

**Participant's signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please tick this box and provide your email or mail address below if you wish to receive a summary of the results of the research.

**Email:** \_\_\_\_\_