
(Letterhead of the School/Faculty/Unit)
(if collaborating with outside researchers
letterhead or current logo for their organisation/institution)

CONSENT FORM

(Title of research must be the same as the Information Sheet)

(Researchers
Chief Investigator name, qualifications and identify if a student and the course)
(Project Supervisor/s name/s positions School/Division/Unit
School / Faculty / Organisation]

I agree [or, *I agree for my child …….*] to participate in the above research project and give my consent freely.

I understand that the project will be conducted as described in the Information Statement, a copy of which I have retained.

I understand I [*or my child*] can withdraw from the project at any time and do not have to give any reason for withdrawing.

I consent to [provide a simple dot point list (or check boxes if appropriate) of what the participant is being asked to do]. Eg,

- participating in an interview and having it recorded;
- providing a 10ml blood sample;
- the researchers accessing my medical records to extract information on ……

I understand that my personal information will remain confidential to the researchers [if applicable in the case of illegal behaviour, add *except as required by law*].

I have had the opportunity to have questions answered to my satisfaction.

Where a participant has the option of participating in one, or more than one, component of a project, the Consent Form should identify each component and have a Yes/No option for each so it is clear to the participants that they have a choice and it is clear to the researchers as to what the participants are consenting to.
This also applies to identifying participants in reports, publication or production using recordings, and archiving material, as well as an option to receive a copy of the study results. A check box should be used to allow participants to agree/disagree to this.

If focus group discussions are to be held the stages of data withdrawal should be clearly identified so that participants can acknowledge that it may not be possible to withdraw all their data if they withdraw once taking part in the focus group discussions.

Print Name: _____

Add **Contact Details** if there is to be further contact with the participant, eg to arrange an interview, if they agree to being notified of any medical issues detected during the research etc.

Signature: _____ **Date:** _____

Where children / young people are of a sufficient age that they could sign a Consent form, or might want to record their consent, the following section should be added. In low risk research involving young people it could be appropriate for the young person to give the primary consent with supporting consent from their parent/guardian, in which case the section below would be changed to *Consent of Parent / Guardian*.

Consent of child / young person < 18 years:

Print Name: _____

Signature: _____ **Date:** _____

NOTE: Charles Sturt University's Human Research Ethics Committee (for minimal risk projects list the Faulty that approved the research) has approved this project. If you have any complaints or reservations about the ethical conduct of this project, you may contact the Committee through the Executive Officer:

The Executive Officer
Human Research Ethics Committee

Tel: (02) 6338 4628
Email: ethics@csu.edu.au

Any issues you raise will be treated in confidence and investigated fully and you will be informed of the outcome.