

UNIVERSITY OF HERTFORDSHIRE ETHICS COMMITTEE FOR STUDIES INVOLVING THE USE OF HUMAN PARTICIPANTS ('ETHICS COMMITTEE')

FORM EC3  
CONSENT FORM FOR STUDIES INVOLVING HUMAN PARTICIPANTS

I, the undersigned [*please give your name here, in BLOCK CAPITALS*]

.....  
of [*please give contact details here, sufficient to enable the investigator to get in touch with you, such as a postal or email address*]

.....  
hereby freely agree to take part in the study entitled **Herts Unfiltered** (UH Protocol number: 06192).

**1** I confirm that I have been given a Participant Information Sheet (a copy of which is attached to this form) giving particulars of the study, including its aim(s), methods and design, the names and contact details of key people and, as appropriate, the risks and potential benefits, how the information collected will be stored and for how long, and any plans for follow-up studies that might involve further approaches to participants. I have also been informed of how my personal information on this form will be stored and for how long. I have been given details of my involvement in the study. I have been told that in the event of any significant change to the aim(s) or design of the study I will be informed, and asked to renew my consent to participate in it.

**2** I have been assured that I may withdraw from the study at any time without disadvantage or having to give a reason.


**3** In giving my consent to participate in this study, I understand that the text, voice, video or photo-recordings I submit may be shared anonymously within the project report.

**4** I have been told how information relating to me (data obtained in the course of the study, and data provided by me about myself) will be handled: how it will be kept secure, who will have access to it, and how it will or may be used, including the possibility of anonymised data being deposited in a repository with open access (freely available).

**5** I understand that if there is any revelation of unlawful activity or any indication of non-medical circumstances that would or has put others at risk, the University may refer the matter to the appropriate authorities.

**8** I have been told that I may at some time in the future be contacted again in connection with this or another study.

Signature of participant: ..... Date: .....

Signature of (principal) investigator:  Date: 01/09/2024

Name of (principal) investigator: FAITH GOLIGHER