

Disability Matters Consent Form



All through the project, we will check to make sure you are happy to share information with us.



Before we start, we will go through the project together and keep checking the points below.



If you have not understood the information sheet, please do not continue with this consent form until you know how you can take part in this project.



For taking part in the project, please read and tick the box if you agree:

I have read and understood the information sheet and the project has been fully explained to me.



I have had time to ask questions about the project.



I have had time to think about if I want to take part.



I agree to take part in the project.



□ I understand that taking part in the project will include taking part in workshops.



□ I am okay with my voice being recorded and used in the research. Everything that people say in the session will be recorded, but only used in the research.



□ I understand that it is my choice to take part and that I can leave the project at any time. I don't need to give any reasons for leaving.

How my information will be used during and after the project



□ I know that you will not use my name for anything I say, so that no

one knows the ideas and opinions are mine.



□ I understand that I cannot talk about things that other people say in the group with people in other groups, or people who are not part of the project.



□ I understand that my name, phone number, address and email address will not be given to people outside the project, except if I want this to happen.



□ I understand that my personal details will only be kept by the research team until the research is finished.



□ I understand that what I say will be kept safe and that the research team will make sure that my name is not used, unless I want this to happen.



□ I understand and agree that what I say may be used in articles, reports, web pages and in other different ways.



So that the information you give can be used by other researchers:

□ The rules of this research have been explained to me and I understand and agree with them.



□ I understand and agree that other researchers can use what I have said, as long as they follow the rules of this research project.



My Consent

I agree to take part in this research

Signed:

.....



Name:

Name:

.....



Date:

.....



Name of Researcher:

.....

Signed:

.....



Date:

.....

Project contact details for further information:



For any other information about the project, please speak to the researcher Ankita Mishra. You can contact her by email at ankita.mishra@sheffield.ac.uk



You can also get in touch with Daniel Goodley, who is the Principal Investigator at the University of Sheffield. His email address is

d.goodley@sheffield.ac.uk

This research has been agreed by the Ethics Committee at the University of Sheffield.



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