

## [Project Title] Consent Form

I, \_\_\_\_\_,

<b>TICK</b>		<b>INITIAL</b>
<input type="checkbox"/>	Have read and understood the provided Information Sheet and Information Sheet Summary.	<input type="text"/>
<input type="checkbox"/>	Have had the opportunity to ask questions and am satisfied with the answers I have received.	<input type="text"/>
<input type="checkbox"/>	Understand the purpose of this study, and the purpose of the intervention.	<input type="text"/>
<input type="checkbox"/>	Understand that participating in this project will require the dedication of [insert number / amount] of my time.	<input type="text"/>
<input type="checkbox"/>	Understand that I am expected to attend all appointments associated with participating in this project.	<input type="text"/>
<input type="checkbox"/>	Understand that I am expected to adhere to the prescribed intervention for the duration of my participation.	<input type="text"/>
<input type="checkbox"/>	Understand that participating in this study will pose X risk, and I understand that the study team will do their best to minimise my discomfort.	<input type="text"/>
<input type="checkbox"/>	Understand that my biological samples will be stored for the duration of the project, and for a further Y years after the end of the project.	<input type="text"/>
<input type="checkbox"/>	Understand that my data will be securely stored for the duration of this project.	<input type="text"/>
<input type="checkbox"/>	Understand that my biological samples, and other data from my participation in this project may be used for future research purposes.	<input type="text"/>
<input type="checkbox"/>	Understand that I can withdraw from this project at any time, without giving a reason, and that my continued care will not be diminished if I withdraw.	<input type="text"/>
<b>OR</b>		
<input type="checkbox"/>	I <b>do not</b> wish to participate, and request that I am withdrawn from this project.	<input type="text"/>

Print name:

Signature:

Date:

Clinician name:

Signature:

Date:

**[See overleaf for additional information about consent form formatting]**

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**N.B.** The document header should include the logos of all institutions involved in the project, for example the Imperial logo, the NHS logo, and/or supporting institutions e.g. the NIHR logo for NIHR funded projects. The document footer should contain the page numbers, document title, version number, and version date.

Remember to tailor your consent form to your project, include any necessary project specific information, and carefully consider if there is anything else your participants need to be aware of, and must consent to, for the study to progress (this often refers to data and sample storage plans, and using samples for future projects).