

**CONSENT FORM FOR PROJECT PARTICIPANTS DOING INDIVIDUAL INTERVIEWS**

**Title of Project: Marginalisation and the microbe: Gender and Bladder Health Issues**

**Name of Researcher and School: Eleanor Kashouris, LPS**

**C-REC Ref no: < (ER/EK403/5)>**

*Please tick box*

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| • I consent to being interviewed by the researcher either face to face, by telephone or by Microsoft Teams.   | <input type="checkbox"/> | <input type="checkbox"/> |
| • I agree to allowing the interview to be audio-recorded, and for it to be transcribed / written out.   | <input type="checkbox"/> | <input type="checkbox"/> |
| • I consent to photographs I provide being used for the purposes of research  | <input type="checkbox"/> | <input type="checkbox"/> |
| • I understand that any information I provide in an interview, or photograph is confidential, and that no information that I disclose will lead to the identification of any individual in the reports on the project, either by the researcher or by any other party.    | <input type="checkbox"/> | <input type="checkbox"/> |
| • I consent to the use of anonymised quotes and/or photographs in publications from the research.   | <input type="checkbox"/> | <input type="checkbox"/> |
| • I have read the information sheet, had the opportunity to ask questions and I understand the principles, procedures and possible risks involved.  | <input type="checkbox"/> | <input type="checkbox"/> |
| • I consent to the processing of my personal information and data for the purposes of this research study. I understand that such information will be treated as strictly confidential and handled in accordance with the General Data Protection Regulation (GDPR) 2016. | <input type="checkbox"/> | <input type="checkbox"/> |
| • I understand that I can withdraw my data from this project (and it will be destroyed) by contacting the researcher up until (01/06/2021)  | <input type="checkbox"/> | <input type="checkbox"/> |
| • I agree to take part in the above University of Sussex research project.  | <input type="checkbox"/> | <input type="checkbox"/> |

Name:

Signature

Date: