Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

GUIDANCE ON PREPARING A CONSENT FORM

This is a sample consent form, which has been developed to help researchers create their own consent form for research studies in the fields of scientific, economic, social or historical research for ethical purposes only. If you are conducting health research[1], please use the consent form template available here. Note that any health research conducted in the School of Social Science and Philosophy should be approved by the Ethics Committee of the Faculty of Arts, Humanities, and Social Sciences.

This guidance note does not constitute legal advice and should be read in conjunction with guidance from the relevant research ethics committee.

The Principal Investigator and the research team should prepare a consent form which meets the exact needs of the research study that is being carried out.

Please note the following:

- The consent form should be prepared in conjunction with the Information Leaflet for the research study.
- Not all of points set out in the table below and phrases in this template will apply to your particular study. Each of the consents should be reviewed to determine if they are required for a particular research study and should be amended to take into consideration any specific requirements and/or details of the research study.
- Please ensure that the consent form is clear, concise and as easy to read and understand as possible. Legal jargon or scientific or economic terms that a participant may not understand should not be included in the consent form.
- This consent form is not suitable if parents/guardians are consenting on behalf of their children, or for any form of proxy consent.

[1]"Health research" means any of the following scientific research for the purpose of human health: (i) research with the goal of understanding normal and abnormal functioning, at molecular, cellular, organ system and whole body levels; (ii) research that is specifically concerned with innovative strategies, devices, products or services for the diagnosis, treatment or prevention of human disease or injury; (iii) research with the goal of improving the diagnosis and treatment (including the rehabilitation and palliation) of human disease and injury and of improving the health and quality of life of individuals; (iv) research with the goal of improving the efficiency and effectiveness of health professionals and the health care system; (v) research with the goal of improving the health of the population as a whole or any part of the population through a better understanding of the ways in which social, cultural, environmental, occupational and economic factors determine health status;

APPENDIX 1 – SAMPLE CONSENT FORM

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STUDY NAME: **Centre ID:** **Identification Number for study:**

Consent Form

The below section should always be included in consent forms. The consents should be reviewed by the Principal Investigator and research team and amended as appropriate in line with the specific requirements and consents being sought from participants.	
There are X sections in this form. Each section has a statement and asks you to tick the box if you agree. The end of this form is for the researchers to complete. **Please ask <u>any</u> questions you may have when reading each of the statements.** **Please leave the box blank if you do not agree.** **Thank you for participating.**	
General	**Tick box**
I confirm I have read and understood the **Information Leaflet** for the above study. The information has been fully explained to me and I have been able to ask questions, all of which have been answered to my satisfaction.	
I understand that this study **is entirely voluntary, and if I decide that I do not want to take part, I can stop taking part in this study at any time without giving a reason**. I understand that deciding not to take part will not affect my future access to x. (Please delete if this is not relevant to your study.)	
I understand that I **will not be paid for taking part in this study.** (Please amend as appropriate.)	
I agree to take part in this research study having been fully informed of the **risks, benefits and alternatives** which are set out in full in the information leaflet with which I have been provided.	
I know how to contact the research team if necessary.	

I agree to being contacted by researchers by e-mail/phone as part of this research study. (Please amend as needed.)	
I agree to take part in an audio-recorded/video-recorded individual interview/group interview as part of this research study. (Please insert appropriate details and delete if not applicable.)	
Data	**Tick box**
I understand that any identifiable information about me (personal data), (including the transfer of this personal information about me outside of the EU), will be protected in accordance with the General Data Protection Regulation (GDPR). (Please amend as appropriate.)	
I understand that the audio/video recording of my interview will be retained by Trinity College Dublin for x years for use solely by Trinity College Dublin, and then destroyed. (Please amend as appropriate and delete if not applicable.)	

Participant Name (Block Capitals) Participant Signature Date

To be completed by the Principal Investigator or nominee.

I, the undersigned, have taken the time to fully explain to the above participant, the nature and purpose of this study in a way that they could understand. I have explained the risks and possible benefits involved. I have invited them to ask questions on any aspect of the study that concerned them.

I have given a copy of the information leaflet and consent form to the participant with contacts of the study team

Researcher name

Title and qualifications

Signature

Date

2 copies to be made: 1 for participant, 1 for PI