**CONSENT FORM FOR PARTICIPANTS IN RESEARCH PROJECTS**

Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research

|  |  |  |
| --- | --- | --- |
| **Title of project:** Mental Health and Wellbeing of Black University Students in the UK | | |
| **Ethical review reference number:** HR-19/20-2048 | **Version number:** 1 | |
|  | | **Tick or initial** |
| 1. I confirm that I have read and understood the information sheet dated **21/08/20** for the above project. I have had the opportunity to consider the information and asked questions which have been answered to my satisfaction. | |  |
| 1. I consent voluntarily to be a participant in this project and understand that I can refuse to take part and can withdraw from the project at any time, without having to give a reason one month after talking to the researcher, up until **26/03/20** | |  |
| 1. I consent to the processing of my personal information for the purposes explained to me in the Information Sheet. I understand that such information will be handled in accordance with the terms of the General Data Protection Regulation (GDPR) and the UK Data Protection Act 2018. | |  |
| 1. I understand that my information may be subject to review by responsible individuals from the College for monitoring and audit purposes. | |  |
| 1. I understand that confidentiality and anonymity will be maintained, and it will not be possible to identify me in any research outputs. | |  |
| 1. I agree that the researcher may use my data for future research and understand that any such use of identifiable data would be reviewed and approved by a research ethics committee (In such cases, as with this project, data would not be identifiable in any report). | |  |
| 1. I consent to my participation in the research being audio recorded. | |  |
| 1. I consent to my participation in the research being video recorded. | |  |
| 1. I understand that I must not take part if I fall under the exclusion criteria as   detailed in the information sheet and explained to me by the researcher. | |  |
| 1. I understand that the information I have submitted will be published as a report and written up in an anthology book. | |  |
| 1. I wish to receive a copy of the final report. | |  |
| 1. I agree to be re-contacted in the future by King’s College London researchers regarding this project. | |  |
| 1. I agree that the researcher may retain my contact details so that I may be contacted in the future by King’s College London researchers who would like to invite me to participate in future studies of a similar nature. | |  |

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**Name of Participant Date Signature**

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**Name of Researcher Date Signature**