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**Consent Form**

**Project**:

**Project Investigator:**

**Date:**

**Name of Research Participant:**

I acknowledge that:

* I have agreed to participate in the project.
* I will not be identified personally at any stage of the project and all data will be kept confidential and only seen by researchers involved in the research project.
* Questions in regards to my participation have been answered to my satisfaction.
* I can obtain further information from the research team at any time during the project.
* I understand that this study has been cleared in accordance with the ethical review processes of the University of Queensland. If I have any questions concerning my participation in the study I should feel free to contact the researchers involved. I understand that I can also speak to an officer of the University not involved in the study.
* I have been provided with the contact details of the investigating officers.
* I understand that I am able to stop taking part in this study at any time without penalty and without giving an explanation for my withdrawal.
* I understand that I may ask that part or all of my data be removed from the study without penalty or explanation. Data that is removed from the study will be deleted and not included in any of the further investigations.
* [add any special aspects of the research here, e.g., “I understand that the interview will be audio-recorded]

**Signature of Research Participant:**

**Signature of Study Investigator:**