

Informed consent form

Informed Consent for a research project conducted by [student's name]

Please tick the appropriate boxes

	Yes	No
Taking part in the research project		
I have read and understood the research project information dated [insert date] or it has been read to me. I have been able to ask questions about the project and my questions have been answered to my satisfaction.	☐	☐
I consent voluntarily to be a participant in this project and understand that I can refuse to answer questions and I can withdraw from the project at any time, without having to give a reason.	☐	☐
I understand that if I do decide to withdraw, the collected data can no longer be removed from the study after [insert date]	☐	☐

Use of the information in the research project

I understand that information I provide will be used for [student's name] research project at Bard College Berlin.	☐	☐
I understand that personal information collected about me that can identify me, such as my name or where I live, will be restricted to the researcher.	☐	☐
I wish to remain anonymous when directly quoted.	☐	☐
For audio interviews only, adjust for other methods of data collection. I understand that this study involves taking part in a recorded audio interview. This recording will be transcribed and, unless otherwise agreed, the original audio will be deleted after [insert time]. Optional: Parts of this voice recording may be used in XYZ and will be available to listen to online by the public.	☐	☐

Signature

_____ Name of participant [IN CAPITALS]	_____ Signature	_____ Date and Place
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Research project contact details for further information [student's name and email]