**Participant Consent Form**

| Consent to take part in Characterisation of Plantar Loading for Foot Health | Add your initials next to the statements you agree to | |
| --- | --- | --- |
| I confirm that I have read and understand the information sheet dated 02/05/2024 version number 1 explaining the above research project and I have had the opportunity to ask questions about the project. |  | |
| I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason and without there being any negative consequences. Upon withdrawal, personal information/data will be destroyed however anonymised data could be retained as set out in the Participant Information Sheet. |  | |
| In addition, should I not wish to answer any particular question or questions, I am free to decline.  Researcher Contact Details are provided below: |  | |
| I give permission for members of the research team to have access to my anonymised responses. |  | |
| I understand that my name will be anonymised before it is linked with any research materials. |  | |
| Where my personal data has been anonymised or pseudonymised, I understand I will not be identified or identifiable in the report/s or publications that result from the research. I understand that my responses will be kept strictly confidential. |  | |
| **OPEN CONSENT:** I consent to the personal data collected from me for research purposes to be anonymised and stored in a trusted online archive (such as a national or university data repository) **for sharing *openly,* i.e. publicly for future use**. |  | |
| **CLOSED CONSENT**: I consent to the personal data collected from me for research purposes to be anonymised and stored in a trusted online archive (such as a national or university data repository) and **shared for *research and teaching only*, on a ‘by request’ (restricted) basis**. |  | |
| I understand that other researchers may use my words (direct quotes) in publications, reports, web pages, and other research outputs, only if they agree to preserve the confidentiality of the information as consented in this form. | |  |
| I understand that relevant sections of the data collected during the study, may be looked at by auditors from the University of Leeds where it is relevant to my taking part in this research. I give permission for these individuals to have access to my records. | |  |
| I agree to take part in the above research project and will inform the lead researcher should my contact details change during my participation in the project and, if necessary, afterwards. | |  |

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| --- | --- |
| Name of participant |  |
| Participant’s signature |  |
| Date |  |
| Name of lead researcher | Francesca Sairally |
| Signature |  |
| Date\* |  |

Lead Researcher

Francesca Sairally

Email: [Bs17f3s@leeds.ac.uk](mailto:Bs17f3s@leeds.ac.uk)

Supervising Researcher

Peter Culmer

Email: p.r.culmer@leeds.ac.uk

\*To be signed and dated in the presence of the participant.

Once this has been signed by all parties the participant should receive a copy of the signed and dated participant consent form, the letter/ pre-written script/ information sheet and any other written information provided to the participants. A copy of the signed and dated consent form should be kept with the project’s main documents which must be kept in a secure location.