



# Life Story Focus Groups Consent Form for Professionals

Thank you for thinking about taking part in this research. If you have any questions please talk to Kate Gridley before you agree to take part. Kate will keep a copy of this form, and give you a copy to keep.

| <b>Please tick the boxes and sign at the end</b>  | <br><b>Yes</b> | <br><b>No</b> |
|---|---|--|
| I have read the information leaflet   | <input type="checkbox"/>  | <input type="checkbox"/>   |
| I have had time to think about taking part in the research  | <input type="checkbox"/>  | <input type="checkbox"/>   |
| I have asked questions if I wanted to   | <input type="checkbox"/>  | <input type="checkbox"/>   |
| I know I do not have to take part in this research if I do not want to  | <input type="checkbox"/>  | <input type="checkbox"/>   |
| I agree to take part in a group discussion for the life stories research project  | <input type="checkbox"/>  | <input type="checkbox"/>   |
| I know I can change my mind before or during this discussion  | <input type="checkbox"/>  | <input type="checkbox"/>   |
| I agree that you can tape record the discussion   | <input type="checkbox"/>  | <input type="checkbox"/>   |
| I agree that you can keep my contact details and a record that I took part in this research for five years after the project ends | <input type="checkbox"/>  | <input type="checkbox"/>   |

\_\_\_\_\_

Participant name

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

\_\_\_\_\_

Researcher name

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

**This research is being conducted by the Social Policy Research Unit, University of York. It has been approved by the Social Care Research Ethics Committee for England. For more information please contact Kate Gridley at the Social Policy Research Unit on 01904 321988 [kate.gridley@york.ac.uk](mailto:kate.gridley@york.ac.uk)**