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| --- | --- | --- |
| Emotion processing and self-harm in young people (EMERGE) | | |
| Participant Identification Number for this trial: \_\_\_\_\_ | | |
| **Name of Researcher(s):** | Professor Rory O’Connor, Karen Wetherall, Seonaid Cleare | |
| **CONSENT FORM** | | Please initial box |
| I confirm that I have read and understood the Participant Information Sheet version 1 dated 31/07/2019 | |  |
| I confirm that I have read and understood the Privacy Notice version 1 dated 31/07/2019.  I have had the opportunity to think about the information and ask questions, and understand the answers I have been given. | |  |
| I agree that should significant concerns regarding my mental or physical health arise during my participation in the study that a member of an appropriate clinical team will be immediately informed. | |  |
| I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, without my legal rights being affected. The research team may use my data up until the point of my withdrawal from the study. | |  |
| I confirm that I agree to the way my data will be collected and processed and that data will be stored for up to 10 years in University archiving facilities in accordance with relevant Data Protection policies and regulations. | |  |
| I understand that all data and information I provide will be kept confidential and will be seen only by study researchers and regulators whose job it is to check the work of researchers. | |  |
| I agree that my name, contact details and data described in the information sheet will be kept for the purposes of this research project. | |  |
| I agree to be contacted by the research team in around 1 months’ time about taking part in another interview. | |  |
| I agree to take part in the study. | |  |

#### Name of participant Date Signature

#### Name of Person taking consent Date Signature

(if different from researcher)

#### Researcher Date Signature

(1 copy for participant; 1 copy for researcher)