



West of Scotland
Twenty-07 study
Health in the Community

MRC
Medical Research Council

CONSENT FORM

RESPONDENT ID

COHORT (1, 3 or 5)

Please tick as appropriate

- ☐ I agree to be interviewed as part of the WEST OF SCOTLAND TWENTY-07 STUDY, as described in the information sheet.
- ☐ I agree to the following physical measures being conducted:- height, weight, waist and hip circumference, pulse rate, blood pressure, lung function and reaction time.
- ☐ I agree that researchers may have access to any centrally held Scottish Morbidity Records relevant to me. I understand that this information is a coded summary of hospital discharge records.

I understand that I do NOT need to answer all the questions if I do not wish to, and that any information I provide will be treated with the strictest of confidence.

NAME (BLOCK CAPITALS PLEASE)

SIGNED

DATE
