



CONSENT TEMPLATE - PARTICIPANT

Research Study Title: **Tuam Oral History Project**

Name and Contact Details of Researcher(s): Dr Sarah-Anne Buckley, sarah-anne.buckley@universityofgalway.ie

Name and Contact Details of Supervisor / Other investigators (if relevant): Dr John Cunningham
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University Data Protection Officer: email - dataprotection@universityofgalway.ie / Tel - (091) 524411

	Please initial the box
1. I confirm that I have read (or had read to me) the Plain Language Statement dated _____ / version _____ for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.	
2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.	
3. I understand that the data collected during this study will be processed in accordance with data protection law as explained in the Plain Language Statement	
4. I agree to take part in the above study.	
Name of Participant	

Name of Person seeking consent Date

Signature

Note: When completed, one copy to be given to the participant, one copy to be retained in the study file.