

# Consent Form for Participants

*Waikato Management School*

Te Raupapa



THE UNIVERSITY OF  
**WAIKATO**

*Te Whare Wānanga o Waikato*

*Insert title of project*

## Consent Form for Participants

I have read the **Information Sheet for Participants** for this study and have had the details of the study explained to me. My questions about the study have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I also understand that I am free to withdraw from the study at any time, or to decline to answer any particular questions in the study. I agree to provide information to the researchers under the conditions of confidentiality set out on the **Information Sheet**.

I agree to participate in this study under the conditions set out in the **Information Sheet** form.

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Researcher's Name and contact information:

Supervisor's Name and contact information: