



## Consent Form for Parents/Caregivers

**Name of department:** HaSS, School of Education

**Title of the study:** Exploring peer relationships at school

- I confirm that I have read and understood the information sheet for the above project and the Researcher has answered any queries I may have had to my satisfaction.
- I understand that my participation is voluntary and that I am free to withdraw from the project at any time, up to the point of analysis, without having to give a reason and without any consequences. If I exercise my right to withdraw and I don't want my data to be used, any data which have been collected from me will be destroyed.
- I understand that I can withdraw from the study any personal data (i.e. data which may identify me personally) at any time.
- I understand that anonymised data (i.e. data which do not identify me personally) cannot be withdrawn once they have been included in the analysis of the study.
- I understand that any information recorded from the online discussion group in the investigation will remain confidential and no information that identifies my daughter will be made publicly available.
- I consent to my daughter being a participant in the project for the four week period.
- I consent to my daughter completing all questionnaires and surveys sent to her in relation to this study by the Researcher.
- I consent that I have read and explained, if required the rules for participating in online discussion groups with my daughter to ensure that she fully understands the principals of the rules.
- I consent to anonymised data from my daughter's participation within this research study to being published in peer reviewed articles or presented at conferences and or within autism training.
- If my daughter has not been selected to take part in this study, **(I consent / I do not consent)** for my/her contact details to be kept on file for 5 years for the purpose of possible future research studies. **(Please underline if you do or do not consent to this statement).**

(PRINT NAME)	
Signature of Parent/Caregiver:	Date:
Daughter's Name:	School Attended: