

Participant consent

R&D Activity:

Name and surnames of the participant:

The participant must read the following questions carefully and mark their answers with an X

	Yes	No
1. Have you been given a copy of the Information Sheet for Participants?		
2. Have you read all the information that you have been given about this R&D activity?		
3. Have you been able to ask questions and comments on the R&D activity?		
4. Have you received enough information about it?		
5. Have you obtained satisfactory answers to all your questions?		
6. Which researcher spoke to you about this project? (Name and surnames of the researcher)		
7. Have you understood that you can abandon this R&D activity at any moment and without having to give any reason for doing so?		
8. Have you understood the possible risks derived from your participation in this R&D activity?		
9. Do you agree to participate?		
10. Will you receive any compensation for participating?		
11. (Other items that may be appropriate to add depending on the characteristics of the project)		

I declare my participation to be totally voluntary and that I understand the commitments that I undertake and expressly accept them. And, for that reason, I sign this informed consent, in duplicate, to voluntarily manifest my wish to participate in this study related to the R&D activity.

By signing this consent form, I do not give up any of my rights. I receive a copy of this consent form to keep and for future consultation.

Participant's signature	Date

If later on you wish to ask any questions or comment on the R&D activity or you wish to abandon your participation in it, please contact:

- (Researcher's Name and Surnames)
- Contact E-mail address:
- Telephone number:

Place, date, and researcher's signature: