**INSERT THE STUDY TITLE**

**ETHICAL APPROVAL NUMBER** (if available)

**RESEARCHER RECORD OF ORAL CONSENT**

|  |  |
| --- | --- |
| **Date** |  |
| **Location (City/Region)** |  |
| **Interviewee Name or Number** |  |
| **Project Explained (Yes/No)** |  |
| **I have sufficient opportunity to ask questions and agree to take part in the study** |  |
| **Interview recorded or Notes Taken** |  |
| **Photos and video to be taken and used in publications and conferences without identifying my name** |  |
| **Participant and Quotes****Indicate YES / NO** | **Direct Quotes** |  |
| **Quotes which would not identify them** |  |
| **Not to be quoted at all** |  |

**Insert Your Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Researcher Signature of Researcher**

**(Signed in the presence of the interviewee to confirm oral consent)**