**M/RDC Participant Questionnaire Consent Form**

**Study Title: TIC-TOC (Targeted Intensive Community-based campaign To Optimise Cancer awareness): feasibility of a symptom awareness campaign to support the Multidisciplinary/Rapid Diagnostic Centre referral pathway in a socioeconomically deprived area**

**Participant ID number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please read the information sheet and then the following statements carefully. Please **initial each box** to show you have read and understood the statement and add your signature where indicated if you consent to take part in this study.

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| --- | --- | --- |
|  |  | Please **initial** box |
| 1.  | I confirm that I have read and understood the Participant Questionnaire Information Sheet (Version 1.3, dated 30.06.2021) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered to my satisfaction.  |  |
| 2. | I understand that my participation is voluntary and that I am free to withdraw at any time, without giving a reason, and without my medical care or legal rights being affected. |  |
| 3. | I understand that the information I provide will be held confidentially for up to 15 years before being destroyed. I understand that I can ask for the information to be deleted/destroyed at any time. I also understand that no information I provide will be given to anyone outside this particular research study. |  |
| 4. | I understand that information about me may be looked at by regulatory authorities supervising the study for audit purposes. I give permission for these individuals to have access to these records.  |  |
| 5.  | I consent to my personal identifiable information being held by Cardiff University |  |
| 6. | I agree to take part in the above study. |  |

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Name of Participant Date Signature of Participant

(BLOCK CAPITALS)

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Name of Researcher Date Signature of Researcher

(BLOCK CAPITALS)