





Consent Form

My name is Poppy Ellis Logan.



I want to find out what it was like for people when they had a power cut last winter



I am meeting and talking to people about their experiences.



You can find more information about the work I am doing in an easy read leaflet.



Consent means you agree to something. If you want to take part in my research, you must give consent.



Sign this form if you agree with all of these things:

 I have read and understood the big booklet about the research project.



I have had time to think about the information.



I have been able to ask any questions I want.



2. It is up to me if I want to take part in the research.

I do not have to take part if I do not want to.



I can change my mind and decide not to take part.



I can change my mind even after I have done the interview.



If I change my mind after the interview, I must tell Poppy within 1 week after my interview



 All of my information that I tell Poppy will be looked after safely.



4. Staff at King's College London may check that my information is being used in the right way.



5. You will keep what I tell Poppy confidential.



 Information I tell you might be shared with other people. They will not know it was me who said it.



7. The things I say will be recorded.

A third party will listen to the recordings. They will write down what I say.



After the third party has written what I said, the recordings will be deleted.



8. My online interview will be videoed as well. The third party will watch the video and write down what I say.

After this, the video will be deleted.



9. I understand who can take part and have an interview.



10. You might use some of the things I tell you in a report.



The report Poppy writes will be put on a website.



What I tell you might also be used for other pieces of work too.



I will tell Poppy if I want a copy of the report.



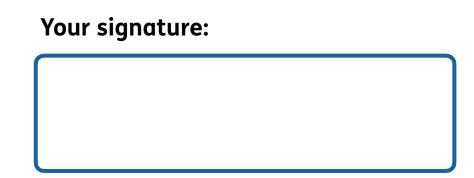
11. I am happy for staff at King's College London to contact me in future about this research.

Sign here if you agree with all of the things on this form.



| Your name: | | |
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| Today's date: | | |
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Name of the person doing the research:



| The | researc | hers | sign | ature: |
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Today's date: