

Qualitative Interview Consent Form

Project Title:

Researcher Name(s):

Institution/Organization:

Introduction

Purpose of the Study

Procedures

Risks and Benefits

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Voluntary Participation

Confidentiality

Contact Information

For any questions, please contact:

Consent

I have read and understood the information above. I voluntarily agree to participate in this qualitative interview.

Participant Name:

Participant Signature:

Date: