

Laboratory Data Sharing Consent

Participant Information

Name:

Date of Birth:

Email Address:

Consent Statement

I understand that my laboratory data may be shared for research and analysis purposes. The data shared will not include information that could directly identify me. I acknowledge that my participation is voluntary and I can withdraw consent at any time.

Consent Options

☐ I agree to share my laboratory data for research purposes.

☐ I consent to my data being used in future related studies.

Signature

Signature:

Date: