



**Activity**

**CONSENT**

**FORM**

**BA (HONS)**

**BA (HONS) GRAPHIC DESIGN**

**Student Name / Email / Phone**

**Research Invitation**

(Name)

(Email)

(Phone)

You are being invited to take part as a participant in an undergraduate research project, resulting in a design outcome.

Before you decide to take part, it is important for you to understand why the research is being done and what it will involve. Ask if anything is unclear or if you would like more information.

You are completely free to decide how much or little you wish to participate in this research.

**This research will be conducted in compliance with the Research Ethics Policy of Arts   
University Bournemouth.**

**Project Title**

(…)

**Project Start and End date**

(…)

(…)

XX/XX/2019 – XX/XX/2019



**Usage**

**Project purpose**

The findings for this project will be used solely  
for non-commercial, educational practices. The outcomes may be included in printed, online and electronic publications, for example, process books, dissertations, AUB’s website, journal articles and competition presentations.

The activity intends to discover…

The hypothesis is that…

The research question is…

The expected outcomes are…

(Student to delete and complete as appropriate)

**Activity request**

**Why you?**

This research activity invites you to… (Student to complete)

I, the researcher, have invited you to be involved because… (Student to complete)





**Data Confidentiality**

**Participation & Withdrawal**

All your data will be stored and used in accordance with current legal requirements (Data Protection Act).

(Student to add details of how data will be stored)

It is entirely up to you to decide if you would like to participate. If you feel there is any external pressure that may affect your ability to decide freely to volunteer or not, then I would ask you to exclude yourself from the project.

Having given this consent you understand that you have the right to withdraw from the project prior to the (insert date) without disadvantage to yourself and without having to give any reason.

**Date Signed**

**Statement of Consent**

The project has been fully explained to me and   
I hereby fully and freely consent to participate.

I understand and have had explained to me any risks associated with this activity.

XX/XX/2019

**Contact info.** (optional)

Contact email address and/or telephone number (Details to be kept securely for up to one year/duration of the project).

(Name of participant)

(Name of parent/guardian if under 18 years)

Signature:

Email/Telephone



If you wish to know more about the about the project or participants rights, please contact:

Name:

Role:

E:

T:

BA (Hons)   
School of Art, Design and Architecture  
Arts University Bournemouth   
Wallisdown, Poole   
Dorset, BH12 5HH

**Researcher:** Please supply the participant  
with a duplicate copy for their records.

Thank you very much for your time and agreement to participate in this project!

**AUB School contact information**

(…)

(…)