

Participant consent form (Observation of Space)

Version number: 1

Date: 9 Oct 2023

Title of the research project: The Spirited North – Visualising Minority Religious and Spiritual Spaces in North England**Researcher(s):** Dr Terence Heng

Please initial box

1. I confirm that I have read and have understood the information sheet dated 9 October 2023 for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily ☐
2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my rights being affected. In addition, should I not wish to answer any particular question or questions, I am free to decline. ☐
3. I understand that I can at any time or prior to the observation and photography starting, ask for access to the information I provide and I can also request the destruction of that information if I wish. ☐
4. I agree for the data I provide to be archived with the Principal Investigator Dr Terence Heng. I understand that other authorised researchers will have access to this data only if they agree to preserve the confidentiality of the information as requested in this form. ☐
5. I agree for the data collected from me to be used in future research and understand that any such use of identifiable data would be reviewed and approved by a research ethics committee. ☐
6. Where applicable (see activities on Point 10) I am aware of and consent to your use of photographs for the following purposes: White papers, reports, exhibitions, academic conferences, academic publications, newspaper articles ☐
7. I understand and agree that what I have said or written as part of this study will be used in reports, publications and other research outputs and that my identity will be anonymised ☐
8. I understand and agree that once I submit my data it will become anonymised and I will therefore no longer be able to withdraw my data. ☐

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9. I understand that I can request access to the data collected, and/or request that the data is destroyed at any time until the data is submitted for publication.

☐

10. I grant permission to Dr Terence Heng to

a. observe and photograph _____

☐

Participant name

Date

Signature

Name of person taking consent

Date

Signature

Researcher

Date

Signature

Principal Investigator

Dr Terence Heng

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