

School of Psychology
Consent Form



**The University of
Nottingham**

UNITED KINGDOM · CHINA · MALAYSIA

Title of Project: MNS effects on ADHD, OCD and GAD

Ethics Approval Number or Taught Project Archive Number: F1296

Researcher(s): Mairi Houlgreave, Dr. Barbara Morera

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The participant should answer these questions independently:

- Have you read and understood the Information Sheet? YES/NO
- Have you had the opportunity to ask questions about the study? YES/NO
- Have all your questions been answered satisfactorily (if applicable)? YES/NO
- Do you understand that you are free to withdraw from the study? YES/NO
(at any time and without giving a reason)
- I give permission for my data from this study to be shared with other researchers provided that my anonymity is completely protected. YES/NO
- Do you agree to take part in the study? YES/NO

“This study has been explained to me to my satisfaction, and I agree to take part. I understand that I am free to withdraw at any time.”

Signature of the Parent or Participant:

Date:

Name (in block capitals) and state if you are a parent or participant:

I have explained the study to the above participant and he/she has agreed to take part.

Signature of researcher:

Date: