**Consent form**

1. **Title of research**

You are being invited to take part in the research study [insert title]. We would like to ask you for your consent to participate in the study and for us to treat your data in agreement with data protection legislation. Before you decide to participate in this study, it is important that you understand why the research is being done and what it will involve. Please take the time to read the following information carefully. Please ask the researcher if there is anything that is not clear or if you need more information.

1. **Project description and aim of the study**

[Describe the project and the purpose of the research]

1. **Data controller, research group and principal investigator**

Aarhus University is Data controller for the processing of your personal data. The study group [insert study group name] is responsible for the study (hereinafter “study group”). The study group is run by [insert name, address and phone number of PI].

Principal investigator: [Name, mail]

Other researchers: [Name, mail]

1. **Study procedure**

[Describe the procedure of the experiment]

1. **Benefits and risks**

[Insert study benefits and risks. If there is no risk please use the phrase “no risks beyond those encountered in normal everyday life”]

Your expected earnings for participating in the study are [insert].The study is expected to last [x hours].

1. **Type of personal data and when it is deleted/anonymised**

[Describe exactly, what personal information is used for and what kind of treatment it is subject of (e.g. collection, registration, transmissions etc.); delete a suggestion if not relevant for your study]

[Suggestion 1: payments] We process normal personal information in form of your CPR-number to make payments for participation in the study. The CPR-numbers are not connected to any data from the research and are deleted as soon as payments are finalized. [insert date if possible].

[Suggestion 2: normal personal information] This study collects normal personal information. Specifically, we [insert treatment: e.g. collect, process, keep etc.] information in form of [insert data type e.g. contact information, economic situation, CV etc.] and link it to a personal identifier, such as [name, CPR, SONA ID …]. The data is collected for [insert purpose of use].

[Suggestion 3: sensitive information] We process sensitive personal information in form of [insert data type; e.g. political, philosophical or religious orientation, ethnicity, genetical data, union memberships, sexual orientation, biometric data, health information etc.]. The information is collected for [insert purpose].

[Suggestion 4: Storing data] We will store your personal information in the form of [insert type e.g. SONA ID (and thereby access to phone numbers), names, emails etc.] until the data collection of the study is finalised. This is expected to happen on [insert date], but could possibly take longer as long as necessary for the purpose.

1. **Potential external data processors**

We share your personal information with [Insert external data processors: e.g. researchers from other universities, public authorities etc.; emphasize if you share data with people outside EU or with an international organisation; delete this section if you share the data only with people from AU].

**8. Withdrawal of consent**

Participation is voluntary and you may withdraw your consent at any time without stating a reason. This is done by [insert who and how; e.g. contact information on data controller; if the data is completely anonymised after the study, then explain that a subject can withdraw consent during the study, but the data cannot be withdrawn thereafter, because the subject cannot be identified in the data]

Signature

I confirm to have received, read and understood the above information and that:

1. My participation is voluntary, and I may withdraw my consent and discontinue participation in the project at any time as specified in point 8. My refusal to participate will not result in any penalty.

1. By signing this agreement, I do not waive any legal rights or release Aarhus University, its agents, or you from liability for negligence.
2. I give my consent to [treat my personal data and to] participate as a subject in the study as described above.

 (Signature and date)

 (Name of participant, please complete in block capitals)