**Participant Withdrawal Form**

*[Delete me: text in square brackets and red font is for information only and should be deleted. Other text may be altered to better suit the specific research study, but the key messages must be retained]*

|  |  |
| --- | --- |
| **Research Title:** | *[insert title as it is listed on the Participant Information Sheet]* |
| **Lead researcher:** | *[insert names as it is listed on the Participant Information Sheet]* |
| **Other researchers:** | *[insert names, positions and affiliations of other researchers]* |
| **Ethics approval number:** | *[insert ethics approval number]* |

**Declaration by Participant**

* I wish to withdraw from participation in the research project.
* I understand that I do not need to provide a reason for my decision to withdraw and that withdrawal will not affect my *[routing care, relationship with the University or researchers, etc]*.
* I understand that the Participant Information Sheet (version number *[insert number]*) explains what happens if I withdraw, and I have had any questions answered to my satisfaction.

|  |  |
| --- | --- |
| Participant name (please print): |  |
| Date: |  |
| Participant signature: |  |

**Declaration by parent/guardian** *[delete table if not needed]*

|  |  |
| --- | --- |
| Parent/guardian name (please print): |  |
| Relationship to the participant: |  |
| Date: |  |
| Parent/guardian signature: |  |

**Declaration by Researcher**

I have answered any questions about withdrawal, and I believe that the participant has understood any implications of withdrawal.

|  |  |
| --- | --- |
| Researcher name (please print):  |  |
| Date: |  |
| Researcher signature: |  |