**Note: This is an example of an information sheet for potential participants. The italicised text/yellow highlights will need to be adapted to suit your own study. Remember to use non-academic language that can be understood by everyone: it’s important that potential participants are able to understand the information provided.**

**Version number xxx and date xxxx**

**Participant Information Sheet**

**(Parent/Guardian)**

My name is [ADD Researcher name ] and I am an [Delete as appropriate - undergraduate student/postgraduate student/researcher] from the [ADD School/division ] at Queen Margaret University in Edinburgh. As part of my [delete as appropriate - degree course/research study], I am undertaking a research project titled:

**ADD Simple/Everyday title here**

**(ADD Scientific Title of Research)**

**You child is being invited to take part in a research study. Before you and your child decide whether or not to take part, it is important for you and your child to understand why the research is being done and what it will involve. Please take time to read the following information carefully. Talk to others about the study if you wish. Contact us if there is anything that is not clear or if you would like more information. Take time to decide whether or not your child should take part.**

(in the questions below please refer to your child rather than participants)

**What is the purpose of the study?**

Add the purpose of the study here in everyday language: e.g. - This study will investigate / is about / is looking into xxxxxxxxxx.

**Why have I been asked to take part?**

We would like your child to participate in this project. There are no criteria (e.g. gender, age, or health) for being included or excluded – everyone is welcome to take part.

Or [If there are inclusion / exclusion criteria then these should be stated.] e.g., You child has been asked to take part as they have been previously diagnosed with xxxxxx, or work at xxx organisation, or shopped at xxxx etc. Or: Your child is/may be part of a Control group (this means that your child will be given the placebo treatment/standard treatment/no treatment) for a study investigating xxxxx

**Do I have to take part?**

No, it is up to you and your child to decide whether or not to take part. If your child takes part, you will be given this information sheet to keep and you will be asked to sign a consent/assent form. If your child decides to take part, they are still free to withdraw at any time and without giving a reason. Deciding not to take part or withdrawing from the study will not affect their legal rights [if applicable - the healthcare that they receive].

**What will happen if I take part?**

Explain what will happen from the participant’s point of view in everyday language.

[If applicable: Distinguish what will be standard procedures as part of the study.]

[If applicable: How long will visits take, any inconvience etc. e.g.: The whole procedure should take no longer than xx minutes.]

Your child will be free to withdraw from the study at any stage and they will not have to give a reason.

[If applicable: With your consent we will inform their GP that they are taking part in this study.]

Are you asking for consent to re-contact participants? Explain that you plan to use their anonymised data collected for future ethically approved studies.

[If applicable: Since their participation will involve you/them travelling to Queen Margaret University, you will be reimbursed for out-of-pocket expenses.]

For complicated/lengthy studies, a flowchart outlining the study is always useful

For long-term studies what will happen if new information (e.g. safety information) becomes available?

**What are the possible benefits of taking part?**

They may/may not get a direct benefit from taking part in this study. Appeal to altruism if there is no benefit but don’t oversell if there is a benefit.

**What are the possible disadvantages and risks of taking part?**

It is not thought that there are any disadvantages; however, it is possible that xxxxxx or The researcher is not aware of any risks associated with xxxxxxxxxx. It is worth reiterating how much time, how many visits etc will be required in the study.  
  
[If applicable: For studies involving scanning/tests/etc. explain the probability of finding incidentals and the procedure by which they will be dealt with.]

**What happens when the study is finished?**

[If applicable: you and your child will receive a copy of findings or explain what will happen to interview transcripts. What will happen to data/samples etc. If the participant has been receiving a novel drug/treatment will they still be allowed access to it after the study has ended?]

**Will my taking part in the study be kept confidential?**

All data will be anonymised as much as possible [if applicable - but your chil may be identifiable from tape recordings of their voice / or xxxxxxxxxx]. Or Their name will be replaced with a participant number, and it will not be possible for your child to be identified in any reporting of the data gathered.

**GDPR Notification:**

All of your child’s personal information will be treated in accordance with the terms of the UK Data Protection Act 2018 and the General Data Protection Regulation (GDPR). Processing their personal information is necessary for the performance of a public task carried out in the public interest or in the exercise of official authority vested in us as the Data Controller (GDPR Article 6 (1)(e) and for statistical and research purposes (Article 89 GDPR). Appropriate security measures including anonymisation will be put in place to protect their data at all times. Their personal data will be treated with confidentiality and will not be shared with any third party or transferred out with the EEA without your/your child’s express permission or without ensuring appropriate safeguards are in place. Their data will only be retained for as long as is necessary. You/your child have the right to withdraw your/their consent to us processing your personal data at any time. In order to do so, please contact [ADD name of data custodian (usually supervisor for students/researcher for staff projects) and email]. Please note that your child’s data may be used in the production of formal research outputs before you/they withdraw consent, therefore it is advisable to contact us as soon as possible if you/they wish to withdraw your/their consent. We will destroy their identifiable data upon request, where possible, however in some situations we will require to use the data collected up until your/their withdrawal of consent. If you have any questions relating to the processing of their data which are not resolved by contacting [ADD your name/researcher and email] please contact the QMU Data Protection Officer [cdickson1@qmu.ac.uk](mailto:FOI@qmu.ac.uk)

**What will happen to the results of the study?**

The study will be written up as xxxxxx, published/conferences/academic thesis or assignment?

**Who is organising the research and why?**

This study has been organised by Queen Margaret University [if applicable: ADD collaborating external organisation(s)] and [If applicable: funded by xxxx]

**Who has reviewed the study?**

The study proposal has been reviewed by [ADD ethics committee that reviewed application] and a favourable ethical opinion has been obtained [if applicable - add if requiring also ethics from an external ethics committee or abroad]. QMU Governance approval [if applicable - add if requiring also governance approval from an external body] has also been obtained.

**If you have any further questions about the study please contact:**

Name of researcher: [ Researcher name ]

Address: [ School/division ]

Queen Margaret University, Edinburgh

Queen Margaret University Drive

Musselburgh

East Lothian EH21 6UU

Email: [ Researcher’s email address ]

**If you would like to discuss this study with someone independent of the study please contact:**

[Delete this once modified - note that the independent adviser cannot be a member of your supervisory team]

Name of adviser:[ADD name of independent advisor]

Address: [ Researcher’s School/division ]

Queen Margaret University, Edinburgh

Queen Margaret University Drive

Musselburgh

East Lothian EH21 6UU

Email: [ADD independent advisor’s email]

**If you have any complaints about this study or would like to report an adverse event please contact:**

QMU University Research Ethics Committee

Address: QMU Research Ethics Committee

Queen Margaret University, Edinburgh

Queen Margaret University Drive

Musselburgh

East Lothian EH21 6UU

Email: [Researchethics@qmu.ac.uk](mailto:Researchethics@qmu.ac.uk)

**If you have read and understood this information sheet, any questions asked have been answered, and you would like your child to be a participant in this study, please now see the consent form.**

Thank you for taking the time reading this information sheet.