

CONSENT FORM

Title of Project: **The EDiT Study: Evaluation of Doctors in Training.**

[Phase 2: Longitudinal Observational Study of Foundation Year 2 Doctors]

Name of Researcher: Ms Suzanne Mason Principal Investigator

Please initial box

1. I confirm that I have read and understand the information sheet dated 29/09/2009 (version 5.) 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 in the study is voluntary and that I am free to withdraw at any time without giving any reason and without being affected in any way.
3. I understand that relevant data collected from me during the study may be looked at by authorised individuals such as regulatory authorities (for purposes such as monitoring the conduct of the research). I give permission for these individuals to have access to data collected during the study.
4. I agree to take part in the above study

Name of Person Date Signature

Research Team Member Date Signature

When completed, 1 for patient; 1 for researcher site file
