



*Appendix 2 with the CETOR Application form*

## **Template Informed Consent Form**

This is an example (template), designed as a form for 'live' interaction with participants. You may adapt it depending on the intended target group and/or the method of data collection.

### **Name of participant**

### **Name of study**

1. I have read the information about this study dated <YYYY/MM/DD>, or it has been read to me and I understood it. I have been able to ask questions about the study and my questions have been answered to my satisfaction.

2. I consent voluntarily and freely to be a participant in this study. I understand that I can refuse to answer questions and that I can withdraw from the study, without having to give a reason.

3. I understand that taking part in this study involves that I will be asked to...

4. I understand that taking part in this study has the following potential risks or inconveniences: .....

5. I understand that the information I provided will be used for .....

6. I understand how my personal data will be obtained, handled and protected. That includes.....

7. I understand that personal information collected about me and that can identify me will not be shared beyond the research team.

8. I have the right to withdraw from the study at any time without giving any reason and without any negative consequences for me. I will then inform the researcher. I understand that my data collected up to that point can then not always be deleted because of the integrity of the research.

Because: (explain which situation may then apply)

- Removing data actually damages the integrity of the research. This is usually the case when a dissertation is before the reading committee and/or the research data have already been published.

- The data collected have already been processed (e.g., anonymized or aggregated) to the point that they cannot be traced back to the individual and therefore cannot be removed.

### Optional

9. I agree to the reuse of my data at the end of this study by the same or other researchers for other research purposes.

Yes

No

10. I consent to be <audio and/or video> recorded.

Yes

No

11. I agree that my real name can be used for quotes.

Yes

No

### Contact details researcher

- *Name*
- *Phone number*
- *E-mail*
- *Postal address*

## Complaints

If you have complaints about this study, and you cannot come to an agreement with the researcher, please contact the secretary of the Ethical Committee (CETOR) of the Faculty of Law of the University of Groningen.

Maarten Goldberg  
Secretary of the Ethical Committee (CETOR)  
Faculty of Law - Research Office  
T: +31 50 36 34904  
T: +31 6 10 500 501  
E: [m.goldberg@rug.nl](mailto:m.goldberg@rug.nl)

At any time, you also have the right to file a complaint with the Data Protection Officer (DPO) of the University. If you have any concerns or queries, please contact the DPO:

University of Groningen  
P.O. Box 72  
9700 AB Groningen  
Central Office for Privacy  
Email: [privacy@rug.nl](mailto:privacy@rug.nl)

Your message will always be shared with the Data Protection Officer (DPO) of the University.

You also have the right to file a complaint to the Dutch DPA:  
[www.autoriteitpersoonsgegevens.nl/en](http://www.autoriteitpersoonsgegevens.nl/en)

Date (yyyy-mm-dd):	Signature researcher:

Datum (yyyy-mm-dd):	Signature participant:

This form should be signed in duplicate and one copy should be given to the participant at the time of signing.

Please note that there are alternatives to obtaining permission digitally, for example a PDF signed by both parties.

Please contact the CETOR Secretary if you wish to use this method.

