

**Appendix E: Consent Form****CONSENT FORM****How do people experience assessment and/or therapy for symptoms of posttraumatic stress disorder when they lack memory of the trauma event?**

**Please answer the following questions to the best of your knowledge**

Please note: Both the researcher Hannah May and the participant will receive a signed copy of this consent form

YES  
NO

**HAVE YOU:**

- been given information explaining about the study?
- had an opportunity to ask questions and discuss this study?  
 YES  
 NO
- received satisfactory answers to all questions you asked?  
 YES  
 NO
- received enough information about the study for you to make a decision about your participation?

YES  
 NO

**DO YOU CONFIRM THAT YOU:**

- are willing to have your interview audio recorded?  
 YES  
 NO

**DO YOU UNDERSTAND:**

that you are free to withdraw from the study

- at any time?  
 YES  
 NO
- without having to give a reason for withdrawing?  
 YES  
 NO

You have the option below to consent to participation in this study. There is also a separate option to consent to the University of Bath retaining your anonymised data for use in future research projects by approved University researchers. Please

note that you do not have to consent to your data being retained in order to participate in the current study.

**I hereby fully and freely consent to my participation in this study**

I understand the nature and purpose of the procedures involved in this study. These have been communicated to me on the information sheet accompanying this form.

I understand and acknowledge that the investigation is designed to promote scientific knowledge and that the University of Bath will use the data I provide for no purpose other than research.

I understand that the data I provide will be kept **confidential**, and that on completion of the study my data will be **anonymised** by removing all links between my name or other identifying information and my study data. This will be done before any presentation or publication of my data.

I agree to the University of Bath keeping and processing the data I have provided during the course of this study. I understand that these data will be used only for the purpose(s) set out in the information sheet, and my consent is conditional upon the University complying with its duties and obligations under the Data Protection Regulation.

Participant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name in BLOCK Letters: \_\_\_\_\_

**I hereby fully and freely consent to my data being retained for use in future research**

I understand that the University of Bath may use the data collected for this project in a future research project but that the conditions on this form under which I have provided the data will still apply.

I understand that the data retained will be in anonymised format and will not identify me to anyone.

Participant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name in BLOCK Letters: \_\_\_\_\_

If you have any concerns related to your participation in this study please direct them to the Department of Psychology Research Ethics Committee, via email: [psychology-ethics@bath.ac.uk](mailto:psychology-ethics@bath.ac.uk).