



FACULTY OF EDUCATION AND HEALTH SCIENCES RESEARCH ETHICS COMMITTEE  
(EHSREC)

Adolescent Assent form

PROJECT NAME

Commented [RC1]: Include UL logo, EHS number and name of project

- I have read and understood the participant information sheet.
- I understand what the study is about, and what my results will be used for.
- I understand where the research will be carried out.
- I understand that my name will not appear on any research data from this study.
- I give permission that my data can be used anonymously in report format and published output (e.g. journal publication).
- I am fully aware of all of the procedures, and of any risks and benefits associated with the study.
- I know that my participation is voluntary and that I can withdraw my participation in the study up to the point of data analysis (two weeks after the focus group) without giving any reason.
- I have read and understand the contents of the Research Privacy Notice.

This study involves audio recording. Please tick the appropriate box

- I am aware that my participation in this study's focus group will be audio recorded and I agree to this. However, should I feel uncomfortable at any time I can ask that the recording equipment be switched off. I am entitled to an anonymised summary of the focus group if I want to review it. I am fully informed as to what will happen to these recordings once the study is finished.

- I do not agree to being audio recorded in the focus group.

After considering the above statements, I \_\_\_\_\_ (name) assent involvement in this research project.

Name of participant: (please print): \_\_\_\_\_

Participant Signature : \_\_\_\_\_  
\_\_\_\_\_

Date:

Name of parent/carer: (please print): \_\_\_\_\_

**Witness to Assent:**

I certify that I was present for the discussion and that the subject had an opportunity to ask questions, appeared to understand the information presented and agreed to participate voluntarily in the research.

Investigator's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Print name \_\_\_\_\_

***This research study has received Ethics approval from the Education and Health Sciences Research Ethics Committee EHS REC 2025-XX-XX  
If you have any concerns about this study and wish to contact someone independent you may contact:  
Chair Education and Health Sciences Research Ethics Committee  
EHS Faculty Office  
University of Limerick  
Tel (061) 234101***

**Commented [RC2]:** Ensure that this message is included at the foot of all publicly facing documents (recruitment flyers, consent forms, debriefing documents, gatekeeper emails etc. ). The only exception is the RPN

