User Research Consent Form

**Introduction:** This form is to confirm your consent to participate in our user research study. Your participation is voluntary, and you are free to withdraw at any time without any penalty. The information you provide will be used to improve our products and services.

**Researcher’s Contact Information:**

* Name: [Researcher's Name]
* Position: [Position]
* Phone: [Contact Number]
* Email: [Email Address]

**Study Description:**

* Purpose of the research: [Describe the objective of the research]
* What will be done during the research: [Describe the activities participants will be involved in]
* Duration of participation: [Specify the time commitment required]
* Location of the study: [Specify the location where the research will be conducted]

**Risks and Benefits:**

* Potential risks: [Describe any potential risks to participants]
* Benefits to the participant: [Mention any benefits participants might receive, like incentives or valuable experience]

**Confidentiality:** Your participation in this study will remain confidential. Data collected will be anonymized, and personal identifiers will be removed in any reports or publications resulting from this research.

**Consent:**

* I have read the above information
* I have been allowed to ask questions and any questions have been answered to my satisfaction
* I consent to participate in the research study

**Participant’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Researcher’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_