Sample informed consent form (over-18s)

(Title of the research project)

Dietary habits in Catalonia (Acronym and funding institution)

Please read this consent form carefully before deciding whether to take part in this study.

(Purpose of the research)

The purpose of this research is to identify dietary patterns over the year, in all contexts: studies, holidays, home, celebrations, etc., with the aim ....

(What participation in the study involves)

First of all, we will ask you for some basic information, such as what you remember eating or drinking in the last week. We will also ask you to identify which drinks/foods you consider most desirable from a list with icons and photographs. Finally,... (...)

(Duration)

The survey takes around 20 minutes. The workshop to prepare the meal takes around 50 minutes.

(Risks and benefits)

Your participation involves no risks of any kind.

(Compensation)

In this case, no compensation is envisaged for taking part.

(Confidentiality)

If you decide to take part, your identity will remain confidential and only members of the research team will have access to the project data. Pseudonyms will always be used if case studies need to be presented.

This informed consent form will be kept in a safe place by the principal investigators and will be destroyed five years after the end of the project. When the project is over and all data have been analysed, the whole database will be anonymised and made available to other interested researchers.

(Voluntary participation)

Participation in this study is completely voluntary. There is no penalty for opting not to take part.

(Right to withdraw from the study)

You can withdraw from the study at any time without giving explanations and with no negative consequences: just by letting us know through any communication channel. As well as this, you can exercise your rights under the European General Data Protection Regulation by making a request to (identity and email address of the data controller), enclosing a photocopy of your ID document. Request forms for this purpose are available on the website of the UAB Data Protection Office (<https://www.uab.cat/web/coneix-la-uab/itineraris/proteccio-de-dades/drets-de-les-persones-interessades-1345764799916.html>).

You may also file a claim before the Catalan Data Protection Authority (<https://apdcat.gencat.cat/ca/contacte>), or contact the UAB data protection officer (proteccio.dades@uab.cat).

In all cases you will receive a written response within the legal time limit, stating what action has been taken.

(Subsequent publication/re-use/other processing of the basic data and conservation period)

The data will be kept as long as they are deemed necessary for the treatment purposes and addressing the possible responsibilities that may arise, without prejudice to the exercise of the rights that the RGPD recognizes to the data owners. In addition, these data will be made available to other researchers anonymously after five years from the end of the project.

The processing of your data does not involve automated decisions or creating profiles for predictive purposes of personal preferences, behaviors, or attitudes.

(Recordings and use of contributions made)

\_\_I agree to the interview being recorded (audio/video) for research purposes.

\_\_I consent to my contributions being quoted literally with no mention of my name and to audio or video recordings of my statements being played back with no mention of my name.

\_\_I consent to the use of my contributions in audio or video recordings for purposes of scientific dissemination, provided steps are taken to safeguard my privacy.

(Contact person)

If you have any queries, you can contact the following:

(PI of the research project, email address, phone number, postal address).

(Consent)

* I have read the information about the research project and I have had the opportunity to ask questions, which have been answered to my satisfaction.
* I understand that the anonymised information (with no personal identifiers) on this project will be placed at the disposal of other researchers some time after the project has ended.
* I agree to take part and I have received a copy of this consent form.

Full name of the participant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Researcher:

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_