

## **FULL CONSENT FORM FOR ALL DARE ACTIVITIES**

Name of individual (capitals)	DARE Study Number
Please INITIAL EACH STATEMENT to show your agreement	

IVal	me or individual (capitals)	Number
PΙε	ease INITIAL EACH STATEMENT to show your agreement	
1.	I have read the participant information sheet on the above project and have been given I have had the opportunity to ask questions about the project and I am satisfied with the I have been given.	
2.	I agree to give blood samples for research in the above project, including genetic analyst that giving a sample for this research is voluntary and that I am free to withdraw at giving a reason and without my medical treatment or legal rights being affected. I ur data and samples will be made anonymous prior to being circulated to other scientists.	any time without
3.	I understand that I am "gifting" the blood samples to the Royal Devon & Exeter NHS and SW Peninsula Diabetes Research Network, and that I will not benefit financially leads to the development of a new treatment or medical test.	
4.	I understand that there is no time limit on the duration for which my blood serum or DI stored for future genetic research in diabetes and that it may be transferred to an experience Research Tissue Bank to preserve it's continued use for research.	
5.	I give permission for my medical records to be looked at both now and in the future, us details and NHS number, and for information from them to be used in strict confidence the research team. I understand that information held by the NHS and records maintainformation Centre and NHS Central Register may be used to keep in touch with me a health status	e by members of nined by the NHS
6.	I agree to donate a urine sample and I understand this will be stored indefinitely and studies solely concerned with diabetes and related diabetes conditions.	used in research
7.	I agree that the samples I have given and the information gathered about me can be future projects related to diabetes. I understand that researchers other than the DAR may carry out some of these projects, that the results of these investigations are unli implications for me personally and that I will not receive the results of my personal tests.	E research team kely to have any
8.	I agree that if necessary, researchers may contact me again in the future based upon in order to extend their scientific research.	my 'genetic type'
9.	I agree to being contacted with details of future research into diabetes and for my detail a computer database for this purpose.	s to be stored on
10.	I agree to take part in the study and know how to contact the research team if I need to.	
Vol	unteer's signature Date	
l cc	onfirm that I have fully explained the nature of this study to the above named volunteer.	
Co-	-ordinator's signature Date	









