INFORMED CONSENT FORM (AUDIOTAPE)

Consent Form for Audio taping and Transcribing Interviews

	"Study Title"	
	Researcher: Name, Quincy College, Department	
	This study involves the audio taping of your interview with the researcher. Neither your name nor any other identifying information will be associated with the audiotape or the transcript. Only the research team will be able to listen to the tapes.	
	The tapes will be transcribed by the researcher and erased once the transcriptions are checked fo accuracy. Transcripts of your interview may be reproduced in whole or in part for use in presentations or written products that result from this study. Neither your name nor any other identifying information (such as your voice) will be used in presentations or in written products resulting from the study.	
	Immediately following the interview, you will be given the opportunity to have the tape erased in you wish to withdraw your consent to taping or participation in this study.	
By si	gning this form you are consenting to:	
☐ h	aving your interview taped;	
u to	having the tape transcribed;	
□ u	se of the written transcript in presentations and written products.	
By checking the box in front of each item, you are consenting to participate in that procedure.		
	This consent for taping is effective until Date. On or before that date, the tapes will be destroyed.	
	Participant's Signature Date	