# University of Huddersfield

*School of Education and Professional Development*

# Researcher Consent Form (E5)

This form is to be used when consent is sought from those responsible for an organisation or institution for research to be carried out with participants within that organisation or institution. This may include schools, colleges or youth work facilities.

**Title of Research Study:**

**Name of Researcher:**

**School/College/organisation:**

Describe i) the purpose of the research study

ii) the data collection methods to be used

iii) which pupils/groups/classes will be selected for this study.

I confirm that I give permission for this research to be carried out and that permission from all participants will be gained in line within my organisation’s policy.

**Name and position of senior manager:**

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**Signature of senior manager:**….………………………………………………

**Date:** …………………………

**Name of Researcher:** ……………………………………………………………

**Signature of Researcher:** …………………………………………………………

**Date:** …………………….