

APPENDIX 3

Department of Psychology



Group:

Participant Number:

Participant Consent Form

The Relationship between Perspective Taking and Lie Detection

Name:

E-mail Address:

Please read the following statements and sign below to acknowledge and agree:

- i. I agree to participate in this research on perspective taking and lie detection.
- ii. I understand my participation is completely voluntary.
- iii. I have had the opportunity to ask any questions at any time I wish.
- iv. I understand that I have right to withdraw from the project at any time, without giving a reason and with no adverse consequences.
- v. I have been given full information about the study. (Participant Information Sheet)
- vi. I have been given contact information for the researchers.
- vii. I understand all the information I provided will be regarded confidentially.
- viii. I agree my anonymized data can be made available to other researchers and made open for re-use (with legal and ethical frameworks).

Please tick the box before you sign.

I confirm that I have read this consent form clearly and agree to take part in this project freely and voluntarily.

Signature: Date:

If you have any questions regarding the study, please feel free to contact myself or my supervisor. If you have any concerns regarding this study, you may also contact the Head of Department.

You can contact us via email:

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