

CONSENT FORM

Project Title: Cerebral Lateralisation for Emotion Processing of Chimeric Faces in Individuals with Autism Spectrum Disorder'

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Please tick each box

I confirm that I have read and understood the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

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I understand that my participation is voluntary and that I am free to withdraw at any time during the study, without giving any reason. I understand that once I have completed the study, I can withdraw within two weeks of your completion of the study. In that case, my data will be removed.

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I understand that any information given by me may be used in future dissertations, reports, academic articles, publications, or presentations by the researcher/s, but my personal information will not be included, and I will not be identifiable.

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I understand that my data will be stored separately from any identifiable data, but that the data will be linked by an arbitrary code generated by Gorilla, and that the linkage list can only be accessed by members of the current research team.

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I understand that the anonymised dataset will be shared publicly in online databases to enable their use in future research.

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I agree to take part in the above study.

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