

---

**Fenland COVID 19: Qualitative study of participant experience  
APP SUB-STUDY GROUP**

**Participant study number**

CONSENT FORM B Version X (25/05/21)  
Chief Investigator: Professor Nicholas Wareham  
IRAS Number: 282535

1. I confirm that I have read and understood the information sheet version ( ) dated ( \_\_ / \_\_ / \_\_\_\_ ) for the above study and have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
2. I agree to being interviewed, and for that interview to be audio-taped and transcribed, and additional notes to be made by the researcher who conducts the interview.
3. I agree that all recorded and written information will be stored at the MRC Epidemiology Unit in a secure database, and that Cambridge University will keep identifiable information about you for 20 years after the study has finished.
4. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason and may continue in the main Fenland study.
5. I understand that I will not benefit financially from this research
6. I agree to take part in this study.

..... (Name of Participant) .....(Date).....(Signature)