



Declaration of Consent

To participate in and record an interview for the project DIPEx.ch

Particination	in	interview for the module "COVID-19"	

Name	D.O.B
Surname	

I have been informed by the attached information sheet about the content, purpose and implementation of "DIPEx.ch" and have received a copy of this declaration of consent.

As described in the information sheet, the first step of my involvement in the study is a video- and/or audio-recorded interview about my health experience.

The interview will happen on video.meeting.uzh.ch, a safe videoconferencing platform set up by the University of Zurich. The servers are located in Zurich, in the University's own data centres. The data stream is end-to-end encrypted. The stream is recorded locally by the interviewer. No third parties are involved.

I understand that the conversation will be written out and all references to my identity (such as my name, etc.) will be changed or removed. The transcript will be returned to me to review, together with a second declaration of consent. I can then decide if I would like the interview to be published on the Internet, and how (i.e. as a video, an audio recording, or text).

I understand,

- that the recordings are voluntary when participating in the study
- that I can withdraw my consent to participate in the study at any time without any disadvantages. In this case, the audio or video data will be deleted immediately.

I agree that the interview will be recorded in *(tick as appropriate)*:

- Video and audio
- Audio only

I agree to the full use of my interview, and the corresponding data provided by myself as part of the study, for scientific research and training purposes. I understand that details that may identify me will be removed from my transcripts, and that my documents will be saved under an assigned code to protect my privacy. I agree that this anonymized data can be saved in full.

I am aware

- that my consent to the use of my interview for research purposes is voluntary, and
- that I can withdraw my consent at any time.

Date, Place

Signature

I agree to be contacted for future related research projects. My contact details will remain stored beyond the end of the research project.

Yes

No



