Ethics reference: 17225

Participant Identification Number for this study:

**CONSENT TO PARTICIPATE IN RESEARCH**

**Title of Project: What are the current recommendations on how to use sound therapy to treat adult patients diagnosed with Hyperacusis?**

**Name of Researcher:** Nighat Kalsoom

**Name of Participant:**

 Please initial/tick box

1. I confirm that I have read the information sheet dated xx for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without being disadvantaged in any way.
3. I understand that I have up to two weeks to withdraw my data after the questionnaire has been completed and my data will be removed and deleted.
4. I understand that individuals from the University of Lincoln may look at research data collected during the study, to ensure that the study is conducted appropriately. I give permission for these individuals to have access to my research data. I understand that my data will be anonymised.
5. I agree to take part in the above study.

Name of Participant Date Signature

Name of Person taking consent Date Signature

# Further information and contact details

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