

# Appendix C

**Consent Form**

Name of Interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Study: Purpose of Study (an explanation of the cohort chosen is to be explained):

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* I confirm that I have read and understood the purpose of this study.
* I am aware that by signing the consent form I am agreeing to participate in this research on a voluntary basis.
* I am aware that I can withdraw from the research at any time. Withdrawal could be achieved by sending an email to research.jobsplus@gov.mt or by contacting the Labour Market Analysis Unit on 22201 124.
* I understand that any information I provide during the research is confidential and shall not be used for any purpose other than the research project outlined above.
* I understand that the data shall not be shared with any other third-parties and shall be deleted once the purpose of the research has been achieved.
* I agree that the interviewer named below records my interview. It has been explained to me how this material will be used (if applicable).
* (If applicable) If my interview is recorded, it will be kept confidential and will not be forwarded to third-parties.
* I agree that my personal details, including name and contact details are forwarded to the interviewer by Jobsplus in order for the interviewer to contact me in relation to this research.
* I understand all the terms and conditions above.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Interviewee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Interviewee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_