

INFORMED CONSENT FORM

Project title:

Determination of DNA repair products in urine after UV irradiation of the skin

November 13, 2020

INFORMED CONSENT FOR PARTICIPATION IN RESEARCH PROJECT

Titel:

Determination of DNA repair products in urine after UV irradiation of the skin

Statement from the subject:

I have received written and oral information and I know enough about the purpose, method, advantages and disadvantages of saying yes to participating. I know that participating is voluntary and that I can always withdraw my consent without losing my current or future rights to treatment. I consent to participate in the research project. I have received a copy of this consent sheet as well as a copy of the written information about the project for my own use.

If, during the course of the experiment, significant information about my state of health emerges, I would like information about this:

Yes: _____

No: _____

After finishing the experiment, I wish ____ (tick this) / I wish not ____ (tick this) to be informed about the achieved results. This information is sent to my population registered address.

Name: _____

Date: _____ Signature: _____

Statement from principle investigator:

I declare that oral information about the project has been provided, written information has been provided and there is consent for the subject to participate.

Name: _____

Date: _____ Signature: _____