



University of Glasgow | College of Medical,
Veterinary & Life Sciences

Centre Number:
Project Number: 301100
Subject Identification Number for this trial:

CONSENT FORM

Title of Project:

Optimising healthcare for stroke survivors - a study of health professional perspectives on minimising treatment burden and maximising patient capacity

Name of Researcher(s):

Dr Katie Gallacher
Prof Frances Mair

Please initial box

I confirm that I have read and understand the information sheet dated _____
(version ____) for the above study and have had the opportunity to ask questions.

I understand that my participation is voluntary and that I am free to withdraw at
any time, without giving any reason, without my legal rights being affected.

I agree to take part in the above study.

Name of subject Date Signature

Name of Person taking consent
(if different from researcher) Date Signature

Researcher Date Signature

(1 copy for subject; 1 copy for researcher)

College of MVLS
Ethics Committee

Version 2 13/9/17