

are:



Yes No

Human Research Ethics Committee (HREC)

CONSENT FORM

	Title: Ethics Approval Number:	The Break-Fast study: Effect of a protein-rich <u>Break</u> fast on autophagy in <u>Fasting</u> healthy people	
		H-2021-024	
2.	satisfaction by the rese	so far as it affects me, and the potential risks and burdens fully explained to my arch worker. I have had the opportunity to ask any questions I may have about icipation. My consent is given freely.	
3.	I have been given the opportunity to have a member of my family or a friend present while the project was explained to me.		
4.	. Although I understand the purpose of the research project, it has also been explained that my involvement may not be of any benefit to me.		
5.	I agree to participate in the activities outlined in the Participant Information Sheet (i.e. two blood collections; one prior to and one after consuming a provided drink containing 30 grams of whey protein).		
6.	I understand that I am free to withdraw from the project at any time. Should I consent to future use of any remaining samples, I understand that I am free to withdraw my consent for future analysis by contacting the principal researcher at any time within the next fifteen years. My samples will be destroyed, and my data will be excluded from any analysis not already undertaken, and that this will not affect my relationship with the University now or in the future.		
7.	I have been informed that the information gained in the project may be published in a journal article, student's thesis, news article, conference presentations, website or report.		
8.	I have been informed that in the published materials I will not be identified, and my personal results will not be divulged.		
9.	I agree to my information being used for future research purposes as follows: Research undertaken by these same researcher(s) Yes No Research undertaken by any researcher(s) Yes No		
10	I harahy provida 'aytan	ded' consent for the use of my data or samples in future research projects that	

(i) an extension of, or closely related to, the original project:



11. I understand my information will only be disclosed according to the consent provided, except where disclosure is required by law.
12. I am aware that I should keep a copy of this Consent Form, when completed, and the attached Participant Information Sheet.
Participant to complete:
Full Name:Signature:
Date://
Researcher/Witness to complete: [Not Applicable for electronically returned consent forms.]
I have described the nature of the research to
and in my opinion she/he understood the explanation.
Signature:
Full Name:

• (ii) in the same general area of research:

Date: ___/___/_____