

## Assent form for young people aged 12-15 years

Please answer these questions, by ticking either "yes" or "no", so that we know if you are happy to take part in the ASYMPTOMATIC study:

**Has somebody explained the study to you?**      Yes       No

**Do you understand what this project is about?**      Yes       No

**Have you asked all the questions you want?**      Yes       No

**Have you had your questions answered in a way you understand?**      Yes       No

**Do you understand it's OK to stop taking part at any time?**      Yes       No

**Are you happy to take part in the study?**      Yes       No

If any answers are "no" or you don't want to take part, don't sign your name!

### Your name

.....

### Today's date

.....

The doctor who explained this to you needs to sign this too. After they have signed they will give you a copy. If you spoke to the doctor on the telephone they will sign this form for you and then send you a copy.

**Researcher** full name (please print): ..... Site Name: .....

**Researcher** signature: ..... Date:    /    /

If assent was given over the telephone researcher to complete the following questions:

Date of the telephone call :    /    /

Full name of person who completed the telephone call: .....

Role in study (delete as appropriate): Study team at GP practice / central study team/  
CRN staff

*Please ensure that the participant study number, available in IRSP, is added to the top of this assent form*