

INFORMED CONSENT FORM

Informed consent questions to be integrated into the online survey in Qualtrics and restricting access to the survey unless ALL boxes have been ticked. In a short summary of the study and what they'll be asked to do, participants are given access to the Information Letter(s) again.

The person requesting consent is Janieke Koning for her project *Reading Mentors*.

If you have any questions about the study or your participation, feel free to contact:

Janieke Koning

Email: readingmentors@ugent.be

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Blandijnberg 2, office 130.005, 9000, Gent

Prof. Dr. Elly McCausland (the supervisor)

Email: elly.mccausland@ugent.be

Address: Campus Boekentoren, Blandijn,
Blandijnberg 2, 130.015, 9000, Gent

Data Protection Officer of Ghent University

Mrs. Hanne Elsen

Phone: +32 9 264 95 17

Email: privacy@ugent.be

Address: Campus Ufo, Rectoraat 2, Sint-Pietersnieuwstraat 25, 9000 Gent

Please read the following statements carefully.

By selecting "Yes, I agree", I declare the following:

1. *[for participants under 18 only:]* I confirm that my parent(s)/guardian(s) are aware I am participating in this study and that they do not object. I have provided them the Information Letter for Parents & Guardians.
2. I have read and understand the information about this study. I understand what the study is about and what I'll be asked to do.
3. My participation is entirely voluntary. I know I can skip any questions I don't want to answer and may stop participating at any time.
4. I understand that the data collected will be handled according to the law and the information provided in the Information Letter. I know my answers will be kept confidential and that my name will not be recorded.
5. I understand that if I choose to give my email address for a follow-up interview, it will be stored separately from my survey answers.
6. I may request to withdraw my data within 7 days after completing the survey, without need to provide a reason, by emailing the researcher and **providing the unique ID code** displayed at the end of the survey. I understand this is not possible without the ID code.
7. I understand I will not receive any compensation for participating.
8. I may request a summary of the study results by emailing the researcher.
9. I give permission to publish the study results in, for example in scientific journals, conference presentation, or public workshops and lectures. I understand all reasonable steps are taken to protect my identity and ensure that I cannot be directly identified.

You can download a copy of this form for your records [here](#).

Do you agree to participate in this survey for the study *Reading Mentors*?

- **Yes, I agree.**
- **No, I do not agree.**