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| QUT Icon | **WITHDRAWAL OF CONSENT FOR QUT RESEARCH PROJECT** |
| **Evolution of Disability Arts in Australia**  **QUT Ethics Approval Number 2021000382** | |

**Research team**

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| --- | --- | --- |
| **Name** | **Email** | **Current Organisation** |
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I hereby wish to WITHDRAW my consent to participate in the research project named above.

I understand that this withdrawal WILL NOT jeopardise my relationship with QUT.

I request that data collected about me be destroyed if it is still identifiable.

Please use data collected about me so far for the study.

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| **Name** |  |
| **Optional: Signature** |  |
| **Date signed or noted** |  |
| **Optional:**  **Reason for withdrawal**  **(if provided)** |  |

If you are unable to provide signed written withdrawal the research team will be happy to accept video record your withdrawal, given through your preferred communication modality – verbally, through Auslan, Deaf/Blind sign language, or a text-to-speech computer mediated communication device.

**Please return the signed withdrawal form to the researcher.**

**Please note that you may also withdraw verbally or via email.**