##### Schulich School of Business, York University

##### FORM B

**Informed Consent Form for In-Person Interview or Survey**

My name is (*student, please complete*)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I am a student at York University in the Schulich School of Business. My contact information and that of the professor who is supervising this work is provided below. If you have any questions about this ethics review process or substance of the research please feel free to contact my professor, Dr. Markus Biehl, (phone 416 736 2100, ext. 77947) or the director of the IMBA program, Dr. Cameron Graham, (ext. 777958), for clarification.

My goal is to analyze a process for my final project in (course name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and I am interested in doing so by observing the process and asking questions about it within your organization.

I am therefore asking if you would agree to participate in my research by answering a series of questions. We will make notes of the answers for use in our final report.

I think you may benefit from participation in this research because sometimes when we reflect back on previous experiences or collect our thoughts on a topic we can learn or understand events in a new way. If you feel uncomfortable or concerned about this please let me know and we can either not continue with the interview or reschedule at a time that is more appropriate.

Please understand that you do not have to participate in this research, and that you can terminate your participation at any time during the course of the research. Also feel free to skip any particular question and move on the next one at any time during the research. In addition, once the research is finished, you have the right to ask me to not include the information you provided in my research.

This research is confidential and no individuals or organizations will be identified without their written consent. Any information that could reveal your identity or that of your organization will be excluded from any future papers or research reports that are written based on this research. I will destroy any surveys, tapes or interview notes at the end of this project. This research has been approved by the Schulich School of Business Human Participants Review Committee.

Participant:

*I am fully aware of the nature and extent of my participation in this project as stated above and the possible risks from it. I hereby agree to participate in this project. I acknowledge that I have received a copy of this consent statement.*

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Signature of participant Date

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Printed name of participant Signatures of researchers