

**TO: Participants completing surveys**



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**Consent Form (Surveys)**

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**Date:**

**Full Project Title:** International Humanitarian Law (IHL) Knowledge Research Project – ‘The value and impact of IHL knowledge and training in the Australian humanitarian sector’

**Reference Number:** 2024-180

**Principal Investigator:** Dr Phoebe Downing

**Co-Investigators:** Dr Josh Hallwright and Ms Claire Cayzer

**Research Assistant:** Adriana Stibral

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I have been given a copy of the Plain Language Statement (Surveys), Consent Form (Surveys), and the Australian Red Cross IHL Research Privacy Collection Notice to keep (also available online [here](#)), and I have read and understand these documents.

I freely agree to participate in this project according to the conditions in the Plain Language Statement (Surveys).

I agree to allow Australian Red Cross to collect, store, share, and use my personal and sensitive data in accordance with the Australian Red Cross IHL Research Privacy Collection Notice. In particular, I understand my data will be collected by Australian Red Cross and then shared with and stored in Deakin University’s Centre for Humanitarian Leadership Syncplicity FileShare system.

Yes    No

I agree to (please choose ONE):

- allow my survey responses to be on the record, and thus able to be cited, and my name used in publications.
- allow my survey responses to be on the record, except anything specifically noted in the survey as being ‘off the record’ (in which case, these off the record responses will be anonymised and/or a pseudonym will be used in publications).
- my survey responses being off the record (all responses will be anonymised and/or a pseudonym will be used in publications).

I further agree to allow the researcher the permission to name my organisational affiliation:

Yes    No

I would like to obtain a copy of the research project findings/reports once completed:

Yes    No

Participant’s Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

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**Withdrawal of Consent Form (Surveys)**

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**Reference Number:** 2024-180

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**Research Assistant:** Adriana Stibral

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I hereby wish to WITHDRAW my consent to participate in the above research project and understand that such withdrawal WILL NOT jeopardize my relationship with Deakin University and the Australian Red Cross.

Participant's Name

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Signature

Date

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**Please email this form to:**

Ms Claire Cayzer

Co-Investigator

E: [ccayzer@redcross.org.au](mailto:ccayzer@redcross.org.au)