



### **Request form for Volunteer Case Studies**

At ABC, we are always keen to work in collaboration with students or professionals to support research or university projects, however we abide by strict rules of confidentiality, and because we run confidential helplines cannot ask those service users directly. If you would like to advertise your project on our website and/or social media to 'call for participants' with experience of eating disorders in order to support your project, please take the time to complete the short questionnaire below and then return it to us via email to [events@anorexiabulimiacare.org.uk](mailto:events@anorexiabulimiacare.org.uk) After your research is completed, ABC will provide a link to your results and conclusions on our website, if requested. Alternatively you can return a paper copy by post to: 10-11 Saville Court, Saville Place, Clifton, Bristol BS8 4EJ

Please note there will be an administration charge of £75 to advertise your request on the Anorexia and Bulimia Care website. For university research projects, we require your university's logo and supervisor's contact details and signature.

In order for us to find the best person to match your requirements, and also to make sure we maintain the safety of those with eating disorders, please complete the survey below.

#### **Part 1 – Your Personal Details**

Name:

Title:

Year of birth:

Name of institution:

Address of institution:

Telephone:

Email:

Name of Project Co-ordinator/supervisor:

Address:

Project start date:

Estimated end date:

Please give the purpose and an outline of your research.

Part 2 – Details of your requirements (please circle)

**1. Who would you be looking to contact?**

Service user      Carer (Family or friends)

**2. What age range would you be looking to contact?**

16-25      25-40      40+      other \_\_\_\_\_

**3. Do you have a preferred gender of the person you would like to contact?**

Male      Female      Any gender

**4. How would you like to contact the person?**

Telephone      Email      In person

**5. How often you would be looking to make contact with the person?**

**6. Would they need to be filmed and/or photographed?**

Filmed      Photographed

**7. Would their voice need to be recorded?**

Yes      No

**8. Would you be willing to cover any expenses incurred by participants (E.g. travel)?**

Yes      No

**9. In what form of material would you be sharing the person's experiences?**

Written      Video      Podcast      Other Please specify \_\_\_\_\_

**10. Could the person choose to remain anonymous?**

Yes      No

**11. What is the audience of your proposed project?**

Tutor/Facilitator      Peer group      Public

Please give further details of the intended audience:

**12. Would the information be protected by your Confidentially and Data Protection policies?**

Yes      No

**13. Could the person request a copy of your policies?**

Yes      No

**14. Could the person see their text/interview/film etc. and edit it before it is published?**

Yes      No

**15. Could the person choose to opt out of the project at a later date, including retracting any information already shared?**

Yes      No

Your signature \_\_\_\_\_

Department head/supervisor signature \_\_\_\_\_

Please return this form to ABC, 10-11 Saville Place, Clifton, Bristol, BS8 4EJ or email a scanned copy to [events@anorexiabulimiare.org.uk](mailto:events@anorexiabulimiare.org.uk).

If your application is accepted by ABC we will then request your cheque and your logo for £75 to: ABC, 10 – 11 Saville Place, Clifton, Bristol. BS8 4EJ