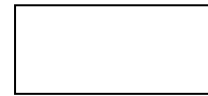


Consent Form (For Subject and Proxy)



For Official Use

Project title:

Panel on Health and Aging of Singaporean elderly (PHASE) 2011

Principal Investigator with the contact number and organization:

Prof. Angelique Chan
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Telephone: 65165685
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I hereby acknowledge that:

1. My signature is my acknowledgement that I have agreed to take part in the following sections of the above research. (Please Check)
 - a. Main Questionnaire only _____
 - b. Main Questionnaire and Anthropometric Measurements _____
2. I may be contacted again for future research. _____
3. I have received a copy of this information sheet that explains the use of my data in this research. I understand its contents and agree to provide my data for the use of this research.
4. I can withdraw from the research at any point of time by informing the Interviewer and all my data will be discarded.

* This research has been explained to me in _____ (state language), which I understand, by _____ (name of interviewer) on _____ (date).

Name and Signature (Participant)

Date

Name and Signature (Interviewer)

Date

Consent Form (For Next-of-kin)



For Official Use

Project title:

Panel on Health and Aging of Singaporean elderly (PHASE) 2011

Principal Investigator with the contact number and organization:

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I hereby acknowledge that:

1. My signature is my acknowledgement that I have agreed to take part in the following sections of the above research.
2. I have received a pamphlet (or a copy of this information sheet) that explains the use of my data in this research. I understand its contents and agree to provide my data for the use of this research.
3. I can withdraw from the research at any point of time by informing the Interviewer and all my data will be discarded.

* This research has been explained to me in _____ (state language), which I

understand, by _____ (name of interviewer) on _____ (date).

Name and Signature (Participant)

Date

Name and Signature (Interviewer)

Date