MobilePass Biometric and Passport Data Collection Consent Form[1]

Purpose

The.....(*name of the institution/lab which is carrying out the study*)..... is carrying out scientific research on the acquisition and verification of biometric (fingerprint images, face images) and passport data. The overall goal of the study is to develop a handheld biometric device that allows European border control authorities to check travellers in a comfortable, fast, and secure way. The study is part of a larger European research project called MobilePass (full title: A secure, modular and distributed mobile border control solution for European land border crossing points), funded by the European Commission within the scope of the 7th Framework Programme (GA no: 608016). In the current project phase, MobilePass uses human volunteers to acquire datasets for developing, testing and evaluating sensor devices and algorithms for fingerprint and face recognition. In addition, real passports may be used for developing and testing the passport reader and for testing biometric verification.

Procedure

In order to provide training and experimental data necessary to the theoretical and practical research and development activities required by the MobilePass project, a number of physical features will be recorded under different ambient conditions. In the session/sessions you are invited to participate in we will record.....*(give a detailed description of the specific procedure)*

In this session/these sessions we are going to collect the following personal characteristics: ……. *(give a description of the type of data, eg fingerprint/face/personal data and security features from passport (MRZ/RFID etc) Please also mention any additional personal data you may record such as gender, age, etc.)*

Each session will last approximately.....(*give a reasonable estimate*).....and individuals may discontinue their participation at any time for any reason without any need to give an explanation for their wish to stop their participation.

Data protection, confidentiality and privacy

All personal data stored during the study will be completely and irreversibly anonymised (unless this refutes the purpose of the study), or be erased on completion of the MobilePass Project. No personal data will ever be used for any purposes other than those stated in this form. Your personal data will not be transferred to any third party or be commercialised. When your

[1] The authors have used the consent form that was developed European research project ACTIBIO as an example for drafting this form (Mordini, Ashton and Massari 2009)

This project has received funding from the European Union's Seventh Framework Programme for research, technological development and demonstration under grant agreement no 608016.

data is stored it will be encrypted and access to the data storage is restricted by password protection. Your personal data may be used by MobilePass project partners located in different European countries. Only staff who are assigned to the relevant WPs in MobilePass have access to the data and transfer of personal data between MobilePass partners will be secured.

The investigator will record the data collected in a file. This file will be identified only by a random user identifier. Your biometric data will be stored separately from other identifying information (such as your name or ID number). The link associating the random user identifier with you is stored separately and securely.

The results of the study may be published in scientific books or journals or may be used for didactic purposes. However, no identifying information about you (name, facial photograph) will ever be revealed in any document, publication or teaching materials.

You may exercise your rights of access, rectification and deletion of data at any time. In order to do so, you will need to communicate your wish to do so to ……..[the WP leader]……. by email to the following address .....

Right to get more information about the study

You can ask any questions about the study at any time throughout the recording period. The investigator will be available to answer to your questions or concerns about the study. You will be informed of any new discovery that could occur throughout the study and that may affect your participation in future studies. If during the study and thereafter you wish to discuss your rights as a person who participates in an investigation, your participation in the study or your concerns about it, or if you do not want to continue in that investigation or future research, please contact .....[the WP leader] ..... any time you wish.

Refusal or cessation of participation

Your participation in this study is voluntary. You do not have to participate in the study if you do not want to do so. If you choose to participate, you can change your mind or leave the study at any time without having to give explanations and without being affected in any way by this decision. Similarly, at the discretion of the investigator, you may be withdrawn from the study for any of the following reasons: (a) if the minimum requirements of the study are not met (b) if for any reason the study is interrupted.

Risks and discomforts

The personal risk by participating in this study does not exceed the risks of daily and normal life. None of the procedures represent a danger to your health or to physical and mental integrity.

Financial Compensation

You understand that there is no financial compensation for participating in this study, but you may be reimbursed for the working hours lost due to participation, or other costs incurred because of your participation (e.g. travel costs).

This project has received funding from the European Union's Seventh Framework Programme for research, technological development and demonstration under grant agreement no 608016.

Consent

By signing the present form, I, the undersigned, understand and consent freely that my personal data, including biometric data, my name and contact details, will be collected and processed by .....[the lab/institute]....., the data controller, and by appointed processors on behalf of the data controller, in accordance with applicable laws and with what is stated in the present clause. I have been informed about the study carried out within the scope of the MobilePass project and its purposes have been explained to me.

I understand that my personal data will be encoded in order to safeguard confidentiality, and that if results of the study are published, my identity will not be revealed. I also understand that I have the right to request access to my personal data, to correct, if applicable, and delete my personal data in conformity with the applicable legislation. For these purposes, I can contact …….[WP leader]……..

I have read the above and I understand that I can refuse to participate in this study without any direct or indirect negative consequence on my life.

By signing the present form, I agree with the above.

[the volunteer]

Date: _____Place:

Name:

Signature:

Email:

Telephone:

The undersigned responsible declares to have explained the purpose of the investigation, the procedures used in the study, and any potential risks and inconvenience that are likely to arise from participation. They have responded to the best of their abilities to the questions asked with respect to the study.

[the investigator]

Date: _____Place:

Name:

Signature:

This project has received funding from the European Union's Seventh Framework Programme for research, technological development and demonstration under grant agreement no 608016.