### Project title:
*What is health for a number of female IDP’s in Georgia.*

<table>
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<th>Date:</th>
<th>2010-03-27 – 2010-05-31</th>
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I have been verbally informed about the study and read the accompanying written information. I am aware that my participation is voluntary and that I, at any time and without explanation, can withdraw my participation.

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I hereby submit my consent to participate in the above survey:

Date: ........................................................................................................

Participant’s signature: ...........................................................................