Researcher: S'fiso Mbusi Sibiya Supervisor: Dr M.S Mthembu Co-Supervisor: Prof. D.N Ocholla

INFORMED CONSENT

Dear participant,

I am a Master's student in the Department of Information Studies. You are kindly requested to participate in the interview/ questionnaires for academic purpose, as I am doing a study titled **"AN ANALYSIS OF MULTIMEDIA LITERACY PROGRAMMES IN SELECTED UNIVERSITY LIBRARIES IN KWAZULU-NATAL"**. You will not be required to write your name or your contact details, therefore your response will remain anonymous. This study does not intend to cause any harm now or in the future, your privacy and confidentiality will remain. You may refuse or withdraw to participate from the project at any time you want.

Your Participation in this study will be of great importance, should you have any queries feel free to contact myself (researcher) or my research supervisors using the following contact details:

Researcher: S'fiso M Sibiya Email: <u>mbusisfiso878b@gmail.com</u> Cell: 073 132 2141 Supervisor: Dr Mpilo S Mthembu Email: <u>MthembuSM@unizulu.ac.za</u> Cell: 071 170 2832 Co-Supervisor: Prof Dennis N Ocholla Email: <u>OchollaD@unizulu.ac.za</u> Cell: 082 372 4638 ERSITY OF

ZULULAND

INFORMED CONSENT DECLARATION (Participant)



I, ______ (full names of participant) hereby confirm that I have been informed about the research study titled **An Analysis of Multimedia Literacy Programmes in Selected University Libraries in Kwazulu-Natal,** by S'fiso Mbusi Sibiya from the University of Zululand. I understand that the process of this study.

I understand that there are no anticipated risks associated with this study. I also understand that my participation will be kept confidential and anonymous, and that my data will be stored securely.

I declare that my participation in this study is voluntary, and that I am free to withdraw at any time without penalty or loss of benefits. I hereby give my consent to participate in this research study.

SIGNATURE OF PARTICIPANT:

DATE: