CONSENT FORM

My name is _____. I am working with the Office de Perimetres Irrigues de Mali (OPIM) in a study to improve our understanding of farmers' perceptions and use of pesticides on vegetables. Even though we will not compensate you directly for your participation in this study, we hope that the information you provide us will lead to healthier farming practices for you and your families.

We invite you to participate in this study. Your participation is voluntary. If you agree to participate, I will ask you in private about the products you sell. Responding to all questions should not require more than 45 minutes.

If you agree to participate, you may refuse to respond to a particular question. You may also interrupt me to ask for additional explanations or to stop the interview. The information you provide is confidential and we will keep it in a secure place. Your name will not be shared or made visible publicly.

If you have any other questions, please do not hesitate to contact the research organization that employs me to conduct this research.

Dr. Amadou Diarra
(0023) 7568 8236/6455 8816
Hamdallaye, ACI, Bamako

If you think that I have responded to your questions regarding this study, please tell me, do you agree to participate in this interview?

_____	_____	_____
Respondent's Name	Yes No	Signature of enumerator