



# APPLICATION TO CONDUCT RESEARCH

## Department of Assessment, Accountability and Research

For Office Use Only

Application Number: \_\_\_\_\_

Date Received: \_\_\_\_\_

Proposed research start date: \_\_\_\_\_

Proposed research completion date: \_\_\_\_\_

Is this a  single year study or  multi-year study?

Title of proposed research: \_\_\_\_\_

### I. Application type(s):

New Proposal	PCS Contracted	Yes	No
Resubmission			
Modification			

### II. Research Overview

What is the purpose(s) of this research?

Thesis

Dissertation

Publication

Course Project (Degree Program).

Other (please specify) \_\_\_\_\_

### III. Grant Funding

Does this request pertain to a grant funded project?      Yes      No

If yes, please provide the complete grant name and official funding agency below:

Grant Name: \_\_\_\_\_

Funding Agency: \_\_\_\_\_

Have you, the Researcher/Study Investigator, contacted or worked with any PCS personnel regarding this grant?      Yes      No

If yes, please fill in the information below regarding grant contact person.

Name: \_\_\_\_\_

Professional Position/Title: \_\_\_\_\_

### IV. Researcher/Study Investigator

Name: \_\_\_\_\_

Professional Position/Title: \_\_\_\_\_

Organization/Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone (Include area code): \_\_\_\_\_

Are you an employee of the Pinellas County Public Schools?      Yes - Location: \_\_\_\_\_      No

*Research organizations acting as an evaluator for FLDOE or USDOE are required to submit evidence in the form of a letter documenting their affiliation with the state or federal government.*

## V. Research Sponsor

Name: \_\_\_\_\_

Professional Position/Title: \_\_\_\_\_

Organization/Affiliation: \_\_\_\_\_

Email: \_\_\_\_\_ Phone (work): \_\_\_\_\_

Sponsor's association with this research: \_\_\_\_\_

*In most instances, the application should have a sponsor; a sponsor is someone who endorses the proposed research, deems it appropriate, believes it to be based on sound educational and research practices, and endorses its approval. University or Agency IRB approval is sufficient if the research applicant is a University faculty member or Agency study investigator.*

## VI. Research Proposal

Attach the following:

- **Abstract:** (max 250 words): Please provide a brief, comprehensive summary of your research proposal indicating the purpose of the research, research questions, hypotheses (if applicable), description of research participants, research method(s), analytic approach, and implications.
- **Rationale for the study:** State clearly what you intend to accomplish with this research.
- **Literature review/Theoretical framework:** Please provide a brief statement of the theoretical basis for your study from prior published research (include reference citations in APA format) and what contribution your work is expected to make to your field.
- **Research questions/hypotheses:** Please state briefly the research questions you plan to address, along with any necessary hypotheses.
- **Sampling procedures** (if applicable): Please describe, in detail, the target population (i.e. grade level, number of schools, specific schools, etc.), sampling frame, and selection procedures for the proposed research.
- **Recruitment procedures** (if applicable): Please provide details of how study participants will be recruited for participation in the proposed research.
- **Draft copies of any forms, letters, and/or other documents** that will be provided to participants or their parents/guardians when applicable.
- **Draft copies of a letter of invitation to principals** to conduct research in their schools when applicable (See procedures for conducting research document page 7 for specifics).
- **Data collection methodology** (if applicable): Please describe the method of data collection and procedures you plan to use.
- **Detailed secondary data request** (if applicable): Please provide a detailed description of the variables you wish to include in your study, be as specific as possible. Please avoid broad or generic statements such as “demographic information” or “test results.” Be sure to include schools, special programs, or departments, where applicable.
- **Measures** (if applicable): Please describe the instruments of measurement you plan to use. Please include results from pilot testing and/or other evidence for the validity of the instruments. For all research instruments that are not part of the district's existing assessment program, submit copies of the instruments.
- **Analytic plan:** Please describe your anticipated analysis plan, including specifics regarding your treatment of the data, statistical or otherwise.
- **Human subjects protections** (if applicable): Researchers/Study Investigators must provide detailed information explaining how the researcher will address privacy and confidentiality issues, any potential risks to participants, and how those risks will be mitigated.
- **Copies of informed consent forms** that comply with Family Educational Rights and Privacy Act (FERPA) and Protection of Pupil Rights Amendment (PPRA) guidelines when applicable.
- **Incentives** (if applicable): The research proposal will include a statement of how research participants are to be compensated for their involvement, if at all.
- **Timeline:** Please provide a chronological sequence of research activities.
- **Data procedures:** Please detail the data security and data disposal plan. Data security plans should outline how all hard copy and electronic data are securely stored to prevent unauthorized access, disclosure, or loss. Data disposal plans should outline when and how data collected in a study will be destroyed. Federal regulations require that research data and related documents such as consent forms be kept in a secure location for a minimum of three years.
- **Burden to the district:** Please describe the burden that your research will have on the District – this applies for research with human subjects and secondary data requests. Depending on the research design, substantial time and effort may be required for staff to provide requested data with the appropriate selection and matching of records and concealment of personal identities. For proposals concerning human subjects research, the proposal will provide a clear rationale for the number of participants,

the number of contacts, and the total time required by each participant. The research proposal will clearly state the number of participants, specifying the role of each group of participants. For example: Twenty math teachers in four schools will be observed, six principals will be interviewed, and forty students from five classrooms will be surveyed. The research proposal will clearly state the amount of time to be requested from each participant and when the interaction will occur. For example: Math teachers will be observed for four class sessions during the first two weeks in March.

- **Benefit to the district:** The proposal must identify the benefits that the research is expected to provide to the District.
- **University or Agency IRB approval letter:** Please provide the appropriate IRB documents or evidence that IRB review is not required. Please submit IRB application if study is currently under IRB review. Please include all completed IRB submissions in one PDF file.
- **Submit all applicable PCS IRB required forms:** (Form A, Form B, Form C, Level II Security Clearance).

*Please label each attachment with the bolded text from the list. Please PDF all attachments as one document with the exception of IRB documents which should be attached as a separate PDF document. For course projects, please attach an abstract and any applicable items from the above list.*

**VII. Application checklist:**

The following documents must be submitted with the application to conduct research in Pinellas County Schools: Check only the boxes for documents being submitted for review.

- Abstract
- Rationale for the study
- Literature review/Theoretical framework
- Research questions/hypotheses
- Sampling procedures
- Recruitment procedures
- Attach draft copies of any forms, letters, and/or other documents
- Attach draft copies of a letter of invitation to principals
- Data collection methodology
- Measures
- Analytic plan
- Human subjects protections
- Please attach copies of informed consent forms
- Incentives
- Timeline
- Burden to the district
- Attach University or Agency IRB application / approval letter
- PCS Form A
- PCS Form B
- PCS Form C
- Level II Security clearance

Please list any additional attachments submitted with the application:

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# Request for School Principal Agreement to Conduct Research in School [Form A]

The Department of Assessment, Accountability and Research (AAR) has given preliminary approval to conduct research in Pinellas County Schools (PCS) to the following:

A copy of the preliminary approval letter from AAR is to be included with this form.

Research Title: \_\_\_\_\_

Research Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## Letter of Invitation to Principals Instructions

Approval by the PCS IRB does not guarantee access to any particular school, individual, or data source. Principal(s), or other PCS staff dependent on the research proposal, may choose that their school/program/staff/students not participate in the research, or may withdraw their school/program from participation at any time without any consequence. The researcher must provide the principal, or other relevant PCS staff, with a letter of invitation to participate in research. *The principal is entitled to review the complete research application on file with AAR and to contact the department to discuss the proposed research.* The letter of invitation to the principal should outline the research design/methodology and provide enough information to assist the principal to make an informed decision about their school's participation (see *Guidelines for Conducting Research* document p.7).

NOTE: Please insert the text of the Letter of Invitation to Principals below

Principal Name: \_\_\_\_\_

School: \_\_\_\_\_

I have reviewed the above research request, and I agree for this school to participate. I understand that the research will not begin at this school until the applicant has provided a copy of the final approval letter from AAR.

I agree to oversee (or assign a designee to oversee) the collection of signed parent/guardian consent forms at this school; to verify the parent/guardian signature, to place a copy in the student's cumulative folder; and to assure that only students with signed consent forms participate in the research. I can review all consent forms and research documents at any time during the study.

I am aware that if this study extends beyond the current school year, the primary investigator is required to renew the school principal agreement (Form A) each year.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Principal

*Please sign and scan or electronically sign using the "Fill & Sign" button in Adobe [Place Signature]. If you submit this document with an electronic signature, you acknowledge that this electronic signature serves as your valid signature under the Florida Electronic Signature Act and the federal Electronic Signatures in Global and National Commerce Act.*

[Form A]



# Researcher/Study Investigator and Research Sponsor Assurances [Form B]

## Researcher/Study Investigator

I understand that I am requesting permission to conduct research in Pinellas County Schools.

I have read and understand the “Procedures for Conducting Research in Pinellas County Schools.”

I understand that the privilege of conducting future studies in Pinellas County Schools is contingent upon the fulfillment of my obligations.

If my research request is granted, I agree to:

Abide by all Federal and State laws and regulations, as well as Pinellas County Schools’ and PCS IRB policies, rules and procedures;

Submit any proposed changes for review and approval prior to being implemented and report any adverse or unexpected events immediately;

Provide written results of the research and any resulting publications to Pinellas County Schools’ Department of Assessment, Accountability and Research.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Researcher/Study Investigator

*Please sign and scan or electronically sign using the "Fill & Sign" button in Adobe [Place Signature]. If you submit this document with an electronic signature, you acknowledge that this electronic signature serves as your valid signature under the Florida Electronic Signature Act and the federal Electronic Signatures in Global and National Commerce Act.*

## Research Sponsor

I am sponsoring this research in Pinellas County Schools.

I understand that a sponsor is someone who endorses the proposed research, deems it appropriate, and believes it to be based on sound educational and research practices. I acknowledge the supervision of this research project.

I have read and understand the “Procedures for Conducting Research in Pinellas County Schools.”

I understand that the privilege of conducting future studies in the Pinellas County Schools is contingent upon the fulfillment of obligations by the Primary Investigator.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Research Sponsor

*Please sign and scan or electronically sign using the "Fill & Sign" button in Adobe [Place Signature]. If you submit this document with an electronic signature, you acknowledge that this electronic signature serves as your valid signature under the Florida Electronic Signature Act and the federal Electronic Signatures in Global and National Commerce Act.*



# Access and Use of Confidential Data and Sharing Project Results [Form C]

Researcher/Study Investigator: \_\_\_\_\_ Submission Date: \_\_\_\_\_

Title of Proposed Research: \_\_\_\_\_

I understand that any unauthorized disclosure of confidential information is illegal as provided in the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g and 34 CFR Part 99), and Pinellas County Schools Policy 8330, Student Records.

I understand that any data or reports that I, or any authorized representative may generate, are confidential and are to be protected. I understand that I am not permitted to distribute to any unauthorized person any data or reports that I have access to or may generate, using confidential data. I understand that I am responsible for any computer transactions performed as a result of access authorized by the use of my sign-on(s)/password(s), and I understand and agree to abide by the Pinellas County Schools Policy 7540.04, Use of Electronic Resources.

I understand the Pinellas County School Board policies regarding the use, retention and disposal of all confidential data.

I understand that any final reports produced as a result of this study must report data in aggregate summaries and not individually. I understand that the confidentiality of all participants must be protected to the extent allowed by law. I agree to maintain the anonymity of individual students, staff members and schools in any report(s) and in any publication(s), e.g., journal article(s), book(s), etc., which incorporate any information derived from the research conducted within the Pinellas County Schools.

I agree to provide the Office of Research, Evaluation, Assessment and Accountability with a summary of the research results, complete documentation and information on the location of the complete research and, in the future, subsequent publications.

I will comply with the access and use of confidential data terms and sharing results listed above.

Researcher/Study Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

Researcher/Study Investigator

*Please sign and scan or electronically sign using the "Fill & Sign" button in Adobe [Place Signature]. If you submit this document with an electronic signature, you acknowledge that this electronic signature serves as your valid signature under the Florida Electronic Signature Act and the federal Electronic Signatures in Global and National Commerce Act.*