



# **Proposal to Conduct Research**

This form is provided as a Word document for your convenience. Answer all questions completely in the provided boxes; boxes will expand if additional space is needed. Retain the format and organization of this form. Proposals that are modified or incomplete will not be reviewed. Proposals found to present inaccurate information will be denied. Only proposals and attachments that are of high quality and free of grammatical and spelling errors will be reviewed. This form must be submitted as a Word document.

1.	Date application submitted:	<b>Date application comp</b> (To be completed by IRB sta			
2.	Has this study been submitted prev	iously? If Yes,		] Yes	🗌 No
	a. What number was assigned to	the previous proposal?			
	<b>b.</b> Indicate name(s) under which j	previous proposal was submitted.			
	c. Indicate approximate date of p	revious submission.			
	d. Indicate District response to pr	evious submission.	[]]	Revisio	ns Required
3.	Individual completing this form (Pr	ovide name, position/title, affiliation,	and cor	ntact inf	formation):
4.	Title of research project (Must matc	ch title on IRB approval letter being su	ubmittec	1):	
5.	Principal investigator(s) (Include na	me, affiliation, and contact information	on for ea	ach PI o	r co-PI):
6.	Members of research team (include	name, affiliation, and contact information	ation for	r all rese	earchers):
7.	List any members of the research	team (including the PI) who are	curren	t or pa	st District

employees, and specify approximate dates of employment:

8. Type of research project (dissertation, government-sponsored, private research, other/specify):

9.	If this research project is a dissertation, indicate:		
a. Faculty Advisor name & contact information:			
	<b>b. Degree type seeking:</b> Masters Ph.D. Other (specify):		
	c. Degree major:		

- **10. IRB Approval:** Each proposal must be accompanied by an approval letter from the IRB of the institution sponsoring the research. Customarily, university IRBs grant approval contingent upon the District IRB approval. Indicate the name of the institution granting IRB approval below, and upload a copy of the approval letter at the time of your submission.
- **11. Project-relevant dates:** Data collection may not begin prior to IRB approval or extend beyond the annual expiration date. Researchers are obligated to electronically submit a final report of their findings to the Student Assessment and Research Department no later than four months after completion of the study. Provide anticipated research dates below after considering that IRB decisions take 6-8 weeks from the time all required documents are received.
  - a. Anticipated date data collection will begin (mm/dd/yy):
  - **b.** Anticipated research completion date (mm/dd/yy):

12.	General	purpose of the research:	
	General	purpose of the rescurence	

## **13.** Background and significance of the study:

Check box if this Research Request is a dissertation and the proposal is attached.

If this project is not related to a dissertation, describe the background and significance of the study below (i.e., literature review):

## 14. Research design and methods

a. Research design:

## b. Research questions:

## c. Definition of variables:

**d.** Describe surveys, tests, and other instruments to be used with participants: (Final drafts of *any* instruments **MUST** be included in application packet.)

#### e. Data:

- i. Specify sources of data <u>NOT</u> dependent on school/District records.
- ii. Specify sources of data that <u>ARE</u> dependent on school/District records and how you plan to gain access to school/District data.
- iii. If data will be requested from the District's Data Warehouse, specify the date range, population, and data elements/variables.

Data Range (i.e., school years of data requested): Population/group (i.e., grades, school levels, schools, etc.): Data/variables (e.g., FSA scores, incidents, attendance, course grades, etc.):

**f. Data collection procedures:** For each participant group, answer the following questions. Indicate "N/A" for participant groups not addressed in this proposal.

## i. Students:

1. Describe research activities that require direct contact with students.

2. At what location will students interact with researchers?

3. Explain how instruments will be distributed to and retrieved from students.

4. If the study will use archival data, explain how student data will be obtained.

#### ii. Parents:

1. Describe research activities that require direct contact with parents.

2. At what location will parents interact with researchers?

3. Explain how instruments will be distributed to and retrieved from parents.

4. If the study will use archival data, explain how parent data will be obtained.

#### iii. Teachers:

1. Describe research activities that require direct contact with teachers.

2. At what location will teachers interact with researchers?

3. Explain how instruments will be distributed to and retrieved from teachers.

4. If the study will use archival data, explain how teacher data will be obtained.

iv. School/District personnel (specify principals, administrators, etc.):

- 1. Describe research activities that require direct contact with school or District staff.
- 2. At what location will school or District staff interact with researchers?
- **3.** Explain how instruments will be distributed to and retrieved from school or District staff.
- 4. If the study will use archival data, explain how school or District staff data will be obtained.
- g. Data analysis procedures:

## **15.** Participants

- a. How will participants be selected for this study?
- b. How will participants be recruited for this study?
- c. What are the inclusion criteria (i.e., eligibility requirements) for participants in this study?
- d. What are the exclusion criteria for participants in this study?
- e. What steps will you take to assure that participation is voluntary?
- f. What will participants be asked to do for this study?

- g. How will you instruct participants?
- h. What is the estimated duration of participation?
- i. How many participants will be included in the study?
  - i. Students: (by grade):
  - ii. Parents: (by grade)
  - iii. Teachers: (by grade):
  - iv. School/District personnel: (specify principals, administrators, staff, etc., by level):
  - v. Other: (specify)
- j. Indicate the School or District levels targeted by your research.

Elementary School	Centers	District Office
Middle School	Vocational-Technical Schools	
High School	Virtual School	

- k. List names of each District school you would like to include in your research; the review process *will not* proceed without specific school name(s).
- 1. List the costs to participants (e.g., monetary costs, loss of instructional time, etc.), if any:

m. Describe your plan for the minimization of risks to subjects.

16	Sta	Statement of risks and benefits:		
10.	Statement of fisks and benefits.		Yes	No
	a.	Are potential risks outweighed by potential benefits?		
	b.	Will all data be collected using numbers or pseudonyms to ensure confidentiality?		
	c.	Will all data be stored in a locked file cabinet or password protected computer file?		
	d.	Will only the researcher and his/her staff or advisor have access to the data?		
	e.	Will data be kept a minimum of five years before being destroyed?		

- 17. Informed Consent/Assent. Final drafts of all consent and assent forms must be submitted.
  - a. Describe the procedures you will follow to obtain the informed consent of adult participants.
  - **b.** Describe the procedures you will follow to obtain the informed consent of students' parents.
  - c. Describe the procedures you will follow to obtain the assent of students.
- **18.** Describe the expected value of the research to education.
- 19. Describe the expected value of the research to Broward County Public Schools

20. Security Protocol: In accordance with the Jessica Lunsford Act 1012.465 F.S., a fingerprint and background check is required of all researchers and members of the research team (the applicant, research assistants, collaborators, etc.) who will be present at a Broward County Public School campus or sponsored school events, or who will have contact with staff, students, or parents under any circumstances. Current Broward County Public Schools employees with a valid security ID badge have already fulfilled this requirement. The District's security protocol is outlined at https://www.browardschools.com/Page/41187.

I understand that, should this proposal be approved:

- Each member of my research team who will be present at a Broward County Public School campus or sponsored school events, or who will have contact with staff, students, or parents under any circumstances must follow all security protocol to obtain a District security ID badge. I further understand that researchers are responsible for any fee required to complete these security procedures.
- Each member of my research team will comply with Sections 1002.022, • 1002.221, and 1002.222 Fla. Stat. and the Family Educational Rights and Privacy Act (FERPA, 20 U.S.C. § 1232g) and its implementing regulations (34 C.F.R. Part 99) and protect the privacy rights of students and their parents with respect to information and records created and/or maintained by public schools.
- 21. Next Steps: After completing this *Proposal* to Conduct Research, navigate to https://www.browardschools.com/Page/41187 and review the Document Checklist to ensure all required forms have been completed before clicking on the Online Submission Link to initiate your Research Request and upload the required documents.

No

Yes