

## School District of Indian River County

Assessment and Accountability Department

6500 57<sup>th</sup> Street

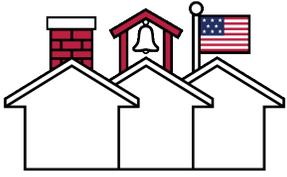
Vero Beach, FL 32967

772-564-3000

### SDIRC Application to Conduct Research

#### Part 1: Contact Information

Name of Applicant	
Title/Position of Applicant	
If employed by SDIRC, school or department assigned	
Email Address	
Phone Number	
Date Submitted	
Title of Research Project	
College/University Affiliation	
Degree Program (M.Ed., Ph.D., etc.)	
Major	
Faculty Sponsor	
Faculty Phone	
Faculty Email Address	



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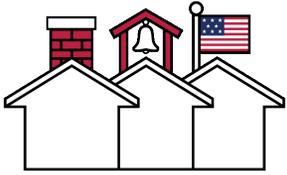
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## Part 2: Research Information

Purpose of Study (200 words or less)	
Significance of Study (200 words or less)	
Research Questions	



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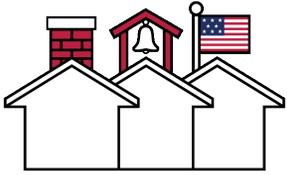
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Quantitative, Qualitative, or Mixed Methods Research Design	
Description of Methodology	
Proposed Sample and Sampling Techniques. Please be specific as possible including the following information if known: <ul style="list-style-type: none"><li>• Number of participants</li><li>• Grade levels/ages</li><li>• Schools</li><li>• Relevant characteristics</li><li>• How participants will be selected</li><li>• Any other helpful information</li></ul>	
Does this research involve human subjects?	Yes [ ] No [ ]
Have you obtained your institution's IRB approval? (If so, attach proof)	Yes [ ] Not yet [ ] Applied [ ]



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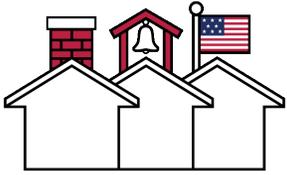
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Data-gathering Instrument(s) To Be Used (please attach)	
Research Timeframe (including start and end date)	
Estimated Time Required of Each Participant	
When will the research be carried out? (During school day, instructional time, after school, etc.)	
Does your research require time and efforts from other personnel? If so, please describe. (District IT personnel, etc.)	
Will your research need access to school/district records? If so, please specify the nature of those records.	Yes [ ] No [ ]
Please state the nature of any possible risk(s) to participants, psychological or otherwise, that might arise.	



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<p>Please state the nature of any benefit(s) to participants (school/student) that might result during this study.</p>	
<p>Date the District will receive results/conclusions of this study.</p>	
<p>List the funding source(s) and amount(s), if applicable.</p>	

### Part 3: Additional Information Needed

The following information must be submitted for the research approval process to begin:

1. A completed "SDIRC Application to Conduct Research".
2. A detailed research proposal.
3. Sample letter(s) of consent and/or assent (if applicable).
4. Data-gathering instruments (if applicable).
5. Evidence of recent (within five years) human subject research training (if applicable)
6. Evidence of approval for proposed research by the Institutional Review Board (IRB) or similar committee affiliated with your university or college (if applicable).

DISTRICT USE ONLY:	
C & I Approval: _____	Date: _____
IS Approval: _____	Date: _____
A & A Approval: _____	Date: _____
HR Approval: _____	Date: _____
Superintendent Approval: _____	Date: _____