

EXTERNAL APPLICATION TO CONDUCT RESEARCH

NOTE: Type or print requested information in spaces provided. Enter check marks in appropriate answer choice blocks.

Α.	IDENTIFICATION OF APPLICANT					
1.	Applicant(s) Name: Provide the names of all principal investigators involved in the research application.					
	A					
	В					
	C					
	D					
2	Lead Researcher Contact Information:					
	□ Mr. □ Mrs. □ Miss □ Ms.□ Dr					
	Business Name:					
	Mailing Address:	G:				
	Street	City	State	Zip		
	Your Professional Position/Title:					
	Contact Telephone Number	E-mail Address				
3.	Are you proposing this study in connection with the de ☐ Yes (If "Yes," answer parts a, b, and c of this question.		isity!			
	a) What degree requirements? □ Master'sb) Who is your advisor or committee chairperso;	□ Doctoral □ Other(specify)				
	b) Who is your advisor or committee chairperson	□ Doctoral □ Other(specify)				
	b) Who is your advisor or committee chairperson Name	□ Doctoral □ Other(specify)	Phone			
	b) Who is your advisor or committee chairperson	□ Doctoral □ Other(specify)	Phone			
	b) Who is your advisor or committee chairperson Name	□ Doctoral □ Other(specify)	Phone			
	b) Who is your advisor or committee chairperson Name	Department City	Phone	Zip		
	b) Who is your advisor or committee chairperson Name	Department City	Phone	Zip		
4.	b) Who is your advisor or committee chairperson Name	Department City e schools will require evidence of institute.	Phone	Zip		
4.	b) Who is your advisor or committee chairperson Name	Department City e schools will require evidence of institute.	Phone	Zip		
4.	b) Who is your advisor or committee chairperson Name	Department City e schools will require evidence of institute you are proposing this study as:	Phone	Zip		
4.	b) Who is your advisor or committee chairperson Name	Department City e schools will require evidence of institut you are proposing this study as:	Phone State stional review board certifica	Zip		

B. MAJOR FEATURES OF PROPOSED STUDY

1.	Title of Research:		
2	Desired time schedule for carrying out the research: From	m/	to/
	Education Area(s): Please circle up to three research areas that		
t c c e f	Academic achievement At risk students College readiness Curriculum or instruction Educational policy or leadership English language learner (ELL) Ethnic or cultural studies Physical health or safety	i) j) k) l) m) n)	Professional development Special education Student social or emotional development Supplemental programs Teacher professional practices Other: Please specify:
4.	Type of research site(s) required:		
	a) Check all that apply: □ Elementary □ Middle □ Hig	gh School 🗆 Centra	al Office
	b) If data will be collected on students, total number of stude	ents needed for this s	tudy:
	 If data will be collected on staff, parents, or former studer study: 	nts, indicate number a	and type needed and briefly describe individuals' roles in
	d) Where do you plan the research to occur (e.g. five high so them:	chools, online, etc.)?	If you have identified particular feeders/schools, please list
	e) Please provide a description of AACPS facilities (i.e., use	e of classrooms, techr	nology, etc.) required for your study:
5.	Requested participation of AACPS staff:		
	a) Will teachers be asked to assist with the study? □ Yes □ If "Yes," for how much time?		
	b) Will other school system personnel be asked to assist with	n the study? \square Yes	No If "Yes," who and for how much time?
6.	Costs: What, if any costs, are associated with the study that AA	ACPS is being asked	to incur (e.g. substitute teacher costs, facilities' costs, etc.)

Directions: In order to give full consideration to your request to conduct research in AACPS, please respond as thoroughly as possible to each of the following questions:

1.	The Purpose of the Study:					
	A)	<u>Purpose and Research Questions</u> : Specify purpose of the study (one to two sentences) and the primary research questions to be addressed. (Response should not exceed 200 words.)	be			
	B)	<u>Rationale for Research</u> : In what ways does your research contribute to the overall body of knowledge and/or instructional per in your discipline? (Response should not exceed 500 words.)	dagogy			
	L					
	C)	Relevance of Research to AACPS: Describe why the research is relevant to AACPS and how it would address the current new interests of AACPS. (Response should not exceed 200 words.)	eds and			

,	Participant Selection: Describe the process by which potential participants will be selected. (Response should not exceed 200 we
	<u> </u>
L	
	Recruitment and Informed Consent: How will selected participants be informed about the project, and what procedures will be unobtain informed consent? Please note that active parent consent is required if you will be collecting student-level data. Data coll from students, staff, parents or other adults also requires consent. You must stipulate on all documentation that is shared with stipulate, or AACPS staff that, in compliance with Board of Education policy, their participation in <i>voluntary</i> . (Response should
	exceed 200 words.)
C)	Collection of Data: Describe how you plan to collect data by addressing each of the items below. (Response should not exceed words)
	 Identify data collection instruments (e.g., test, questionnaire, interview, etc.) and describe what it assesses (e.g., Collective Efficacy – assesses the shared perceptions of teachers in a school that the efforts of the faculty as a whole will have positive
	effects on students). State the amount of time required of participants to complete each instrument. b. Describe the procedures that will be followed in using these instruments. For example, if a survey will be administered, ho
	it be distributed (e.g., online survey using SurveyMonkey).
	c. Describe what procedures will be used to minimize potential disruption to the instructional program and to the ability of st carry out assigned duties. For example, are you conducting all data collection during non-instructional time?
epare	er's statement
	lane and affirm under nonalties of new unit hat the information 1-1 -1 -1 1 1
	lare and affirm under penalties of perjury that the information provided above is true and correct to the best of my information and belief. I understand and agree that if false information is provided, the application will be denied or revoked.

Email Address:

SUBMISSION CHECKLIST AND RESEARCHER'S AGREEMENT

Items to be submitted to AACPS

Required

- □ Cover Page: AACPS form External Request to Conduct Research
- □ Application: AACPS form External Application to Conduct Research (included as pgs. 1-4 of this document)
- □ Signed Researcher's Agreement below

If Applicable

- □ Copy of instruments to be used
- □ Copy of consent forms if study includes parents, students, and/or AACPS staff members
- □ Copy of the documents submitted to the Institutional Review Board (IRB) and the IRB approved decision document

Researcher's Agreement

I (we) understand that review of this request for approval of a research proposal in no way obligates Anne Arundel County Public Schools to participate in this research and that Board policy reserves the final approval of all research requests for the building principals. I (we) also understand that approval does not constitute commitment of resources or endorsement of the study or its findings by the school division or by the School Board.

I (we) acknowledge that participation in research studies by students, parents, and school staff members is voluntary and that written parental permission is required for student participation. I (we) will preserve the anonymity of all participants in all reporting of this study. I (we) will not reveal the identity or include identifiable characteristics of schools or of the school system unless authorized to do so by the Division Executive Director.

If approval is granted, I (we) will abide by all Anne Arundel County Public Schools policies and regulations and will conduct this research within the stipulations accompanying the letter of approval. At the completion of the study, I (we) will provide Anne Arundel County Public Schools with at least two copies of the results.

Each participating researcher must sign below.

Signature of Applicant	Date	
Signature of Applicant	Date	
Signature of Applicant	Date	
Signature of Applicant	Date	