

Research Request Application Checklist

Please use the checklist below as a guide to putting together your research request application materials.

Note that no request will be approved without all completed pieces.

This checklist must be submitted with your research request application.

Research Request Documentation	Completed?	Notes/Comments
Research Request Application		
Research question(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Data needed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Data collection method(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of participants involved	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Alignment to CCSD priorities & objectives	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Timeline of research study: -Dates you plan to collect your data in the schools (<i>if applicable</i>) -Dates you plan to do analysis and write up results -Date you plan to provide CCSD with a final report of your results	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Proposed study question responses: -CCSD priorities -Participant confidentiality -How informed consent will be obtained -Benefits to education/CCSD	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Proposed study outline: -Project outline -Population -Research methods -Data analysis plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Signed research agreement and understanding	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Human Subjects Protection		
IRB approval documentation (<i>required</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Exempt (provide rationale in Notes/Comments)	



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Consent Letters (if study requires direct human contact)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Informed Consent (Informed Consent Checklist)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Data Protection Plan (How will you ensure the data is private and protected?)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Data Destruction Plan (Provide a timeline for data destruction)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Additional Materials		
Survey/Questionnaire	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Interview Questions/Protocols	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Student Pre-Test/Post-Test	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Other Materials	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	