

Brownsville Independent School District

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME OF APPLICANT (Principal Investigator)** |  | **Application Submission Date** |  |
| **TITLE OF STUDY** |  | | |
| **HOW DOES THE STUDY BENEFIT BISD?** |  | | |

***GUIDELINES***

1. *Research involving campus level personnel, especially those which involve principals, teachers and students, may not be conducted during the first 20 school days or the last 20 school days of the school year*
2. *Research involving students and personnel of the District must respect the dignity, well-being, and confidentiality of the individual(s), including the rights guaranteed legally and constitutionally and by District policies EF (LEGAL), FL (LEGAL) and GBA (LEGAL).*
3. *The research shall not unduly interfere with the classroom instructional process or the regular operations of the school or District.*
4. *Personal, social, and psychological research of any nature must not be in conflict with the rights of individuals or groups.*
5. If data will be collected on or from individual students, written permission from the parent/guardian of every student shall be required prior to the implementation of the project.
6. Approved research shall be conducted in accordance with Policies, Rules, and Regulations and Administrative
7. Approval of a request to conduct research is not an endorsement and does not compel any personnel of the District to participate in research studies.
8. An approved research study may be terminated at any time by the Superintendent.
9. The District shall not incur any costs associated with the proposed research project.

**RESEARCH TOPIC(S) - Please indicate up to three research topics that best represent the research focus of your project.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Academic Achievement |  | Physical Health or Safety |
|  | At-Risk Students |  | Professional Development |
|  | College Readiness |  | Special Education |
|  | Curriculum or Instruction |  | Student Social or Emotional Development |
|  | Education Policy or Leadership |  | Supplemental Programs |
|  | Emergent Bilingual (EB) |  | Teacher Professional Practices |
|  | Ethnic or Cultural Studies |  | Other |

**If other, please specify:**

|  |
| --- |
|  |

FOR OFFICE USE ONLY

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Proposal ID#** | |  | | **Received Date** |  |
|  | |  | |  |  |
| 1. ***GENERAL PROJECT INFORMATION*** | | | | | |
| **Title of Study** | |  | | | |
|  | |  | | | |
| **\*Proposed Start Date** | | |  | **\*Proposed Start Date** |  |
| **Brownsville ISD Sponsor/Partner of Study** | | | |  | |
|  | **Primary Data (collected by the investigator conducting the research, through surveys, interviews, observations, etc.)** | | | | |
|  | **Secondary Data (collected by someone other than the investigator, such as information from district databases.)** | | | | |

|  |
| --- |
| 1. ***MAIN PROJECT CONTACT INFORMATION*** |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Title** |  | | **First Name** |  | | **Last Name** |  | | |  |
| **Organization** |  | | | | **Type of Organization** | |  | | |  |
| **Address** |  | | | | | | | | |  |
| **City** |  | | **State** |  | | **Zip Code** |  | | |  |
| **Email** |  | | **Phone Number** |  | | **Brownsville ISD Employee** | | | **Yes** | **No** |
| **If yes, Employee ID** | |  | | | | **BISD School or Department** | |  | | |

|  |
| --- |
| 1. ***ELECTRONIC PROPOSAL APPLICATION CHECKLIST*** |

Check all boxes indicating materials submitted as part of your proposal.

* Cover Sheet (Form A)
* Research proposal (Form B required) Assurances to Brownsville ISD (Form C required)
* Access to Confidential Data Form (Form D required)
* Survey or other instruments to be used for primary data collection Principal's Consent Form (Form F)
* Time Requirement Form (Form G)
* Informed consent letters (for teachers, parents and students, as appropriate) (Templates Form H and J) Submit all materials to [bahhernandez@bisd.us](mailto:bahhernandez@bisd.us)

**\*Research will not be conducted during the first or last twenty school days or during state testing**

\*\* Sponsor/ Partner:

Applicant's Immediate Administrator (Director/Principal) (required for district employee) Applicant's Chairperson/Faculty Advisor (required for Master's/Doctoral students) District Associate Superintendent Approval (required for outside research agencies) Principal/Director at EACH participating study site.

**Print Form**

IV. Executive Summary: Provide a synopsis of the proposed project. The statement should be written so that persons unfamiliar with the research will be able to understand the purpose of the study and what will be required of participants.