



a world of possibility

4640 S. 144th St. Tukwila, WA 98168 | (206) 901-8000 | tukwilaschools.org

External Research Request for Access Form

DATE:

FROM: Name of Applicant:
 Address:
 City: State: Zip :
 E-mail:

TO: Tukwila School District
 Human Resources and Labor Relations
 4640 S 144th St
 Tukwila, WA 98188
 draganova@tukwila.wednet.edu

Title of Project:

Abstract (Describe in 300 words or less what your project will address; the procedures you will employ; the expected outcome in terms of your hypotheses, objectives and possible benefits your completed project will have for Tukwila School District.):

Benefit to Tukwila School District (300 words or less):

1. Number of students (If none are required, specify "none"):
2. Estimated total time required of each student (this should be expressed as total hours per student. If none, specify "none"):
3. Number of teachers required:
4. Estimated total time required of each teacher (this should be expressed in total hours per teacher):
5. Number of parents required:

6. Estimated total time required of each parent (this should be expressed in total number of hours):

7. Number of other Tukwila School District staff required (this may include principals, clerical, or research staff):

8. Estimated total time required of Tukwila School District staff (this should be expressed in total number of hours):

9. Will material from the cumulative records of students or teachers be required? Yes No

9a. If yes, what material? Be specific. Ex: specify math grades instead of grades or reading test scores instead of just test scores.

9b. Is this research being done as part of a degree? Yes No

10. Will subjects be paid? If so, specify payment: Please note: Tukwila School District staff cannot be paid for tasks that occur during the contracted workday.

11. At what grade levels is the project to be conducted?

12. At what school(s) is the project to be conducted?

13. How long is the project expected to run? Specify the starting and ending months and years, ex: October 2019 to October 2020.

14. Will a pilot study be necessary? Yes No

15. When will a report of the project's results be available? Specify the month and year.

16. How will subject's anonymity be protected?

17. How will parent permission be obtained? If parent permission is not required, specify: N/A

18. Additional school resources needed (this may include an interview room, table/chairs or other equipment).

19. Date of first contact with students: Date of last contact with students:

20. A description of procedures that are in place for securing data accessed in support of the proposed research. Procedures include firewalls, internal and external network security, password security, physical security, restricted access, physical and electronic data storage.
21. The procedure used to destroy or return all identifiable data at the project's completion:
22. Date by which ALL original data forms will be destroyed (e.g., questionnaires, video tapes):
23. Name of Principal Investigator. If you are a student, the principal investigator is your faculty advisor or professor, not you.
24. University and Department Affiliation of Principal Investigator:
25. Are you an employee of the district?