



Birdville
INDEPENDENT SCHOOL DISTRICT

Research Statement

Instructions: The researcher should read and sign below the statement. Please return the signed document along with the completed application to:

BISD
Dr. Elizabeth Clark, Associate Superintendent of Curriculum, Instruction, and Accountability
6125 East Belknap Street
Haltom City, TX 76117
Elizabeth.Clark@birdvilleschools.net

I understand that submitting this application does not guarantee that Birdville ISD or its membership will participate in the proposed project. The research project results reporting will be conducted ethically and will abide by Birdville ISD's policies and regulations.

I authorize the district to use the results of this research project unlimitedly and agree to provide electronic copies of the reported findings of the study.

Name: _____

Signature: _____ Date: _____



birdvilleschools.net



817-547-5700