



**TROUP COUNTY
SCHOOL SYSTEM**

OUR SCHOOLS • OUR COMMUNITY • OUR FUTURE

RESEARCH REQUEST FORM

Revised 06/2026

To request to conduct research in the Troup County School System, complete the following application. Read closely and upload all requested documentation. All requests must be reviewed and approved by the district. TCSS employees and researchers outside of the school system must complete this research request form and submit the required documents.

Name

Phone

Email

Address

Are you a Troup County School System employee? ☐ Yes ☐ No

If yes, what is your assigned location and job title?

If no, list your employer.

Projected Research Start Date

Projected Research End Date

Research Project Title

Provide a **brief** synopsis of the research. (Detailed research proposal attached upon submission.)

College or Institute Sponsoring Project

What degree are you seeking?

Faculty Member/Advisor Name

Phone Number

Email

Describe the specific data you are requesting.

Select the research activities directly affecting participants.

Interviews

Surveys

Other

Observations

Pre/Post-Test

Describe in detail the research activities directly affecting participants chosen above.

Which schools are you requesting to conduct your research in?

All Troup County Schools

Hollis Hand Elementary School

All Troup County elementary schools

Long Cane Elementary School

All Troup County middle schools

Rosemont Elementary School

All Troup County high schools

☐ West Point Elementary School

Berta Weathersbee Elementary School

Callaway Middle School

Callaway Elementary School

Gardner Newman Middle School

Clearview Elementary School

Long Cane Middle School

Ethel Kight Elementary School

Callaway High School

Franklin Forest Elementary School

LaGrange High School

Hillcrest Elementary School

Troup High School

Hogansville Elementary School

Other

Select the research subjects who will be involved in your research project. Please know that we rarely allow students to be surveyed or interviewed.

Teachers	Students
Paraprofessionals	None
Administrators	Other
Parents	

State the number of each participant type and the amount of time required to complete the research activities. Include grade level, content area, department, etc. of all participants.

Describe how you plan to safeguard data and protect the privacy of all participants throughout your research. Further, discuss how long you plan to maintain the data and how you will dispose of the information once you no longer need it.

Explain how interruptions to instructional time will be minimized.

Describe how this research project will benefit students, schools, and/or the district. Please be aware that approval will not be granted unless the project supports our district's [strategic plan](#).

Attach the following documents:

- Detailed Research Proposal (purpose, primary research questions, procedure, and anticipated results)
- Copies of all instruments used (tests, surveys, observation forms, etc.)
- Parent Notice/Consent Forms if students are involved

Initial both boxes indicating your agreement to each statement.

I am agreeing to conduct research in the Troup County School District, abiding by all laws and research ethics to safeguard human subject rights and privacy. Further, all records will be maintained with the highest level of confidentiality, destroying any reference to individuals, schools and/or the Troup County School District whenever possible.

I understand that no participant(s) or school(s) will be identifiable through this research project. I recognize that the research is not completed until a copy of the results is emailed to Charity Miller, Assistant Director of State Assessment and Accountability @ millerCW@troup.org.

Electronic Signature

Date

Requester Comments

Email this form along with the required attachments to:

Charity Miller

Troup County School System

Assistant Director of State Assessment and Accountability

millerCW@troup.org

For System Use Only

☐

Approved

☐

Not Approved

Authorized Signature

Date

Comments