



Request to Conduct Research Coversheet

Colorado Springs District 11

Research Review Board

Date _____

I. Background

Title of the Study: _____

Name of Researcher: _____ Phone: _____

Institution of Researcher: _____

D11 Employee: YES NO If YES, School or Department _____

Street address: _____ City: _____ State: _____ Zip: _____

E-mail: _____

D11 Sponsor of the Study: _____ Department: _____

Indicate what type of data the researcher will collect:

___ Primary Data¹ ___ Secondary Data² ___ Both

Indicate which of the following individuals will participate in the study (*Mark all that apply*):

___ Students ___ Teachers ___ Other: _____

Is the researcher willing to include D11 as co-author in publications that might results from this study? YES NO

I agree that the District and D11 Sponsor have the right to review publications prior to release. YES NO

Approximate date on which results will be submitted to D11 _____

II. Application Checklist

Please complete the Research Request Application Checklist. All documentation must be completed prior to submitting for external review.

III. Agreement

If granted permission to conduct this research in the Colorado Springs School District 11 schools, I agree to follow the guidelines for conducting research as described in the External Research Request Handbook.

Signature of Researcher

Signature of Research Supervisor (if applicable)

¹ Primary data- data that has not already been collected; the researcher will actively participate in the data collection process

² Secondary data- data that D11 maintains; the researcher has no involvement in the data collection process. Secondary data, including student-level and aggregate unsuppressed (showing less than 16 students per group), will require a signed and executed Data Protection Agreement.