**APPLICATION FOR PERMISSION TO CONDUCT RESEARCH**

**IN THE DES MOINES PUBLIC SCHOOLS (DMPS)**

 Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Research activities that are locally or regionally sponsored, involving students and/or school personnel in at least one DMPS school require prior written approval from the Research and Data Management Department. Please submit this cover sheet with the following for approval to David Roney at david.roney@dmschools.org or 1915 Prospect Road, Des Moines, IA 50310:

1. A research proposal including the following details:
* Title of study
* Statement of purpose for which the research is being undertaken
* Description of problem; including hypotheses, methodology, and statistical analysis
* Specific data required
* Schools to be surveyed (if known)
* Number of pupils to be surveyed
* Number of teachers and other staff members to be surveyed
* Dates research will be conducted
* Estimated amount of staff and student time required
* A plan for protecting human subjects
* An outline of procedures you will follow in distribution, administration, and collection of instruments requiring staff or student response
* How the research will be used (thesis, advanced degree work, etc.)
1. A copy of all instruments to be used in the study
2. Copies of all contact letters, consent forms, and Institutional Review Board (IRB) approval forms (if applicable)
3. Curriculum vitas/resumes of all research personnel with current contact information

**PLEASE NOTE:**

* Do not contact individual buildings until so directed by the district.
* Allow two weeks for review and evaluation of your request. Please understand that the Des Moines Public Schools have a responsibility for the education of over 30,000 students. With several colleges and universities in the region, it may not always be possible to honor all requests because of the volume of applications.
* To avoid conflicts in opening and closing school activities, research must be scheduled **between October 1 and April 1**. Specific rationales must be provided for exceptions.
* An interview with the applicant may be necessary.

Applicant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Des Moines Contract Teacher? \_\_\_Yes \_\_\_No Student Teacher? \_\_\_Yes \_\_\_No

Sponsoring Institution/Agency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that the granting of permission to pursue this research project in the Des Moines Public Schools obligates me to provide an **abstract of findings** to the Assessment Department and one copy of the abstract to each principal of the building(s) where the project was carried out within one year of the completion of data collection. I grant the Des Moines Public Schools permission to post the abstract to their website. I further agree to comply with all conditions described in “Instructions for Requesting Approval to Conduct Research in the Des Moines Public Schools.”

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Sponsoring Professor (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_