

TVDSB Online Research Review Application

Please note that this document is for reference purposes only and we do not accept paper or email submissions using this document. To submit an application online, please visit our website:
www.tvdsb.ca/researchandassessment

Introduction

Application to Conduct Research

Thank you for your interest in conducting research at Thames Valley District School Board (TVDSB). The TVDSB believes that research plays an important role in guiding the development of board policies and procedure, operational goals, and plans for improvement both at the school and the board levels.

Please ensure that you have read the document, TVDSB Research Review Guidelines, before completing this application. Note that within this application you will be required to upload electronic copies of the following documents:

- Recruitment materials (e.g., posters, flyers, advertisements, letters, and/or other verbal scripts used to recruit/gain access to participants)
- Information letter(s) and consent form(s) for all participants
- Data collection instruments (e.g., surveys, questionnaires, interview questions, focus group questions, tests used to collect data, etc.)
- Criminal Record Check/Vulnerable Sector Check (CRC/VSC) for all researchers involved in the study, including research assistants

All sections of this application must be completed in full before your proposed research will be considered for review.

If you have any questions or require assistance with completing this application, please contact: ResearchApplications@tvdsb.ca

Information about the Applicant and Research Team

Please indicate which type of application you are submitting.

Please note that the second and third options should only be selected for projects in which minor or no changes are being proposed. If significant changes are being proposed, please select the first option (new application).



- I would like to submit a new application to conduct research in TVDSB.
- I would like to submit an amendment to a study that I am currently conducting in TVDSB.
- I would like approval to conduct a project in 2018-19 that has been previously approved by the TVDSB Research Review Committee during the 2017-18 school year.

[The questions presented on pages 2-5 of this document will be asked if either the second or third choice in the above question (i.e., amendment or renewal) is selected. The remaining questions in this document will be asked if the first choice (i.e., new application) is selected]

Researcher's Information

Please enter the Researcher's information below. Please note that if you are a student, your Supervisor/Advisor must complete and sign the application as the Applicant/Principal Investigator.

- First Name _____
- Last Name _____
- Position _____
- Institution/Organization _____
- Department/School _____
- Address _____
- Email _____
- Telephone _____

Please indicate your Project Number:



Please describe your rationale for this request. *(Maximum 400 words)*

Are there any changes to your study?

- Yes
- No

Please describe the proposed changes to your study. *(Maximum 400 words)*

Please upload copies of any study documents that have been updated since receiving approval from TVDSB. Documents may include your institution's amendment/renewal application and approval letter, communication tools, data collection instruments, etc.).

Ensure that all changes to the documents are highlighted in yellow or marked with tracked changes.

Note: If you have more than the allowed space to submit documents, please email any remaining documents to: ResearchApplications@tvdsb.ca

Please upload your amended/renewed ethics application here.

Please upload your amended/renewed approval letter, ethics certificate, or exemption letter here.



Please upload criminal record checks/vulnerable sector checks below. Please note that updated criminal record checks/vulnerable sector checks are not required if you are submitting an amendment for an application that was approved this school year.

Criminal Record Check/Vulnerable Sector Check #1:

Criminal Record Check/Vulnerable Sector Check #2:

Please note, if you have more than two police checks to submit, please email to ResearchApplications@tvdsb.ca

Updated communication tools (e.g., letters of information, consent forms)

Communication Tool #1:

Communication Tool #2:

Communication Tool #3:

Communication Tool #4:

Please note, if you have more than four communication tools to submit, please email to ResearchApplications@tvdsb.ca

Updated data collection tools (e.g., surveys, focus group guides)

Data Collection Tool #1:

Data Collection Tool #2:

Please note, if you have more than two data collection tools to submit, please email to ResearchApplications@tvdsb.ca

If you have any additional documents to submit, please send to ResearchApplications@tvdsb.ca



Applicant

I have read the TVDSB Research Review Guidelines about conducting research in the district and agree to follow the requirements if my application is accepted.

Note: Approval from the TVDSB Research Review Committee does not obligate any individual, school, or department to participate in your research. The final decision to participate in any research project always rests with the individual (e.g., principal, teacher, other staff member, student, parent).

Please use your mouse/stylus/finger to sign below:

Please note that when you click next below (right-facing blue arrow), your application will be submitted.



[The questions presented on the remaining pages will be asked if the first choice in the first question (i.e., new application) is selected.]

Which role best describes you?

- Graduate Student
- College/University Faculty Researcher
- Community Researcher
- School Board Staff/Administrator
- Other (please specify) _____

Please note that your Supervisor/Advisor must complete and sign the application as the Applicant/Principal Investigator.

Information about the Applicant and Research Team

Please enter the Applicant's information below.

Please note that student researchers will require their Supervisor to complete the application.

- First Name _____
- Last Name _____
- Position _____
- Institution/Organization _____
- Department/School _____
- Address _____
- Email _____
- Telephone _____



Applicant Qualifications

What is the highest level of education you have completed to date?

- Ph.D.
- M.A./M.Sc.
- B.A./B.Sc.
- B.Ed.
- Other _____

Are you a Thames Valley District School Board employee?

- Yes
- No

What is your current position with TVDSB?

- Student
- Elementary or Secondary Teacher
- Principal
- Vice Principal
- System Staff (please specify your role) _____
- Other (please specify) _____



TVDSB Supervisor Information

- First Name _____
- Last Name _____
- School/Department _____
- Role _____
- Email _____
- Telephone _____

Co-investigator/Collaborator Information (if applicable)

- First Name _____
- Last Name _____
- Position/Role _____
- Institution/Organization _____
- Department _____
- Address _____
- Email _____
- Telephone _____

Project Description and Timelines

Title of proposed research



Which of the following areas of focus is your proposed research best aligned with? (Note: For more information about these areas of focus, please refer [here](#). *(Select all that apply)*.)

- Relationships
- Equity & Diversity
- Achievement & Well-Being

Briefly describe how your proposed research aligns with the area of focus indicated above. *(Maximum 950 characters or approximately 140 words)*

Intended start date (mm/yyyy).

Intended end date (mm/yyyy).



Nature of Research

Nature of proposed research *(Please select all that apply)*

- University/College Faculty Research
- Doctoral Dissertation
- Master's Thesis
- Undergraduate Thesis
- Additional Qualification Course
- Principal/Superintendent Qualifications
- Externally-Sponsored Project
- Ministry of Education Research
- Research for a Community Organization
- School Board Employee Research
- Other (please specify) _____

Has this proposed research been funded?

- Yes (Please indicate the funding agency or source of funding). _____
- No
- Funding Pending



Has this study been submitted to the TVDSB Research Review Committee on a previous occasion?

- Yes (Please indicate the date (mm/yyyy)). _____
- No

Does your organization have a Research Ethics Board?

- Yes
- No

Has this research been reviewed and approved by your organization's Research Ethics Board?

- Yes
- An application for ethical review has been submitted, but the review process is still in progress.
- No (please explain): _____
- I have received an exemption letter from my Research Ethics Board.

Please note that you must submit approval of your research from your organization's Research Ethics Board before your application will be considered by the Committee.

Please upload your ethics application here.

Please upload your approval/ethics certificate/exemption letter here.

Criminal Record Check/Vulnerable Sector Check (CRC/VSC): All researchers who will be on board property for the purpose of the research, who will be involved with data collection off of board property, or who will have access to identifiable data are required to submit a copy of their CRC/VSC with their application. If the researcher will be going into TVDSB schools and/or working with students under the age of 18 or other vulnerable populations, a VSC is required. If the researcher will have access to identifiable data



and/or will be working with adults in TVDSB, a CRC is required.

The CRC/VSC should be dated no more than 6 months prior to the TVDSB Research Review application deadline.

Please list all researchers who fit these criteria for your study and upload the documents below.

Note that if your application is approved, you will be asked to provide a hard copy of the CRC/VSC for verification by the TVDSB Research Review Committee.

Have Criminal Record Checks/Vulnerable Sector Checks (CRC/VSC) been completed for all researchers listed above?

- Yes
- No. **Criminal Record Checks/Vulnerable Sector Checks (CRC/VSC)** are in progress. (Please provide the date (mm/yyyy) you expect to submit these to TVDSB). _____

Please upload your Criminal Record Check(s)/Vulnerable Sector Check(s) (CRC/VSC). *If approval is granted, original copies will need to be delivered to the committee and verified.*

Note: If you have more than 5 to submit, please email any remaining checks to: ResearchApplications@tvdsb.ca

Criminal Record Check/Vulnerable Sector Check (CRC/VSC) # 1

Criminal Record Check/Vulnerable Sector Check (CRC/VSC) # 2

Criminal Record Check/Vulnerable Sector Check (CRC/VSC) # 3

Criminal Record Check/Vulnerable Sector Check (CRC/VSC) # 4

Criminal Record Check/Vulnerable Sector Check (CRC/VSC) # 5



Research Objectives

Describe the purpose or goal of your research, including how your research contributes to the field of education. *(Maximum 950 characters or approximately 140 words)*

Indicate if you feel there is the potential for participants to experience any of the following risks by taking part in your proposed research:

	Yes	No
Physical risk (including any bodily contact or administration of any substance)?	<input type="radio"/>	<input type="radio"/>
Psychological risk (including feeling demeaned, embarrassed, worried, or upset)?	<input type="radio"/>	<input type="radio"/>
Social risk (including possible loss of status, privacy, and/or reputation)?	<input type="radio"/>	<input type="radio"/>
Is there any deception involved?	<input type="radio"/>	<input type="radio"/>
Other (please specify):	<input type="radio"/>	<input type="radio"/>

If you said 'yes' to any of the potential risks above, please describe the potential risk(s) involved in your proposed research and how you will manage them. *(Maximum 950 characters or approximately 140 words)*

Note: Your description should include an explanation outlining why alternative approaches could not be used.



Data Collection and/or Data Requests

Specify the number of schools required for your proposed research

	# of schools
Elementary	
Secondary	

Do you have preferred schools that you would like to connect with?

- Yes
- No

Select the preferred elementary schools you would like to be involved in your proposed research.

Note: Approval from the TVDSB Research Committee does not obligate any school or department to participate in your research. The final decision to participate in research always rests with the individual (e.g., principal, teachers, other staff, parent/guardian, or student).

Select the preferred secondary schools you would like to be involved in your proposed research.

Note: Approval from the TVDSB Research Committee does not obligate any school or department to participate in your research. The final decision to participate in research always rests with the individual (e.g., principal, teachers, other staff, parent/guardian, or student).



Please explain why these are your preferred schools (*Maximum 950 characters or approximately 140 words*)

How many of the following groups of participants will directly participate in your proposed research?

	K (JK/SK)	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9- 12
Students										
Teachers/ Staff										
Parents/ Guardians/ Families										
Other (please specify)										



How many of the following groups of participants will directly participate in your proposed research?

	Number of Participants
Principals/Vice Principals	
Superintendents	
System Staff (e.g., Social Workers, Learning Coordinators)	



Approximately how much time (in minutes) will be required for each of the following data collection instruments?

	Assessment or Test	Survey / Questionnaire	Individual Interview	Focus Group	Experimental Task	Other
Students						
Teachers/Staff						
Principals/Vice Principals						
Parents/Guardians/Families						
Other (please specify):						

If there is any additional information you would like the TVDSB Research Review Committee to know about the number of participants required or the amount of time required for participation, please share these details below. *(Maximum 950 characters or approximately 140 words)*



Describe any requests you may have for data from TVDSB. *(Maximum 950 characters or approximately 140 words)*

Please note - all requests will require approval and completion of a data sharing agreement.

Please sign below to confirm that there will be 2 adults present at all times while conducting research with students in TVDSB.

Please use your mouse/stylus/finger to sign below.

Method of Investigation/Study

Provide a brief summary of your planned method(s) of data collection. *(Maximum 950 characters or approximately 140 words)*

Please list the names of all data collection instruments (e.g., tests, surveys, interview guides, etc.) and a timeline for when they will be administered.

Please upload copies of all data collection instruments (e.g., tests, surveys, interview guides, etc.) below.

Note: If you have more than 5 *data collection instruments* to submit, please email any remaining instruments to: ResearchApplications@tvdsb.ca



Data collection instrument 1:

Data collection instrument 2:

Data collection instrument 3:

Data collection instrument 4:

Data collection instrument 5:

Explain your plans for obtaining informed consent for participation. *(Maximum 950 characters or approximately 140 words)*

Please note: Parental/guardian consent is required for all students younger than 18 years of age.

Please upload copies of information letters, consent letters, and all other communication materials below.

Note: If you have more than 5 *different communication documents* to submit, please email any remaining documents to: ResearchApplications@tvdsb.ca

Communication document 1:

Communication document 2:

Communication document 3:

Communication document 4:

Communication document 5:



List the security procedures you will put in place for the protection of participant privacy and data storage. *(Maximum 950 characters or approximately 140 words)*

Provision for Feedback

If your project is approved, you will be required to submit a Study Completion Form to the TVDSB Research Review Committee in June and a research report within one year of study completion. The Study Completion Form will be sent with your study approval letter.

Other than the Study Completion Form, please describe your plans to communicate your research results to participants, participating schools, and/or the district school board office. *(Maximum 950 characters or approximately 140 words)*

Describe any publications/speaking plans for this research (e.g., academic journals, social media, online news, conference presentations, etc.). *(Maximum 950 characters or approximately 140 words)*

Please upload any additional documentation below.

Note: If you have more than 5 additional documents to submit, please email any remaining documents to:
ResearchApplications@tvdsb.ca



Document 1:

Document 2:

Document 3:

Document 4:

Document 5:

Signatures

Applicant

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