

**Nature of Research**

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|---|--|---|--|
| ☐ Undergraduate Thesis | ☐ Master Thesis | ☐ Doctoral Thesis | ☐ University Research |
| ☐ Principal's Course | ☐ AQ Course | ☐ Externally-Sponsored Project | |
| ☐ Other: | | | |

Proof of permission and/or ethical review is required from your university/institution.☐ **The approval/ethics certificate from my university/institution is attached.**☐ **Date of submission:**☐ **The approval/ethics certificate is in progress (please provide details below, including expected date of approval/amendment).****Name:** _____**Address:** _____**Contact Number:** _____**Email:** _____**Agency/Institution:** _____**Position/Role:** _____**Are you employed by the Niagara Catholic District School Board?**☐ **Yes**☐ **No****If yes, please indicate your position/role:****PROJECT DESCRIPTION AND TIMELINE****Title of Research Project:** _____**Preferred start date:** _____**Preferred end date:** _____**Expected date of report to the Board: (research summary submitted to the Board/participating schools)****Please list all other school boards to whom you are submitting an application to conduct this research project.**

RESEARCH OBJECTIVES

- 1. Provide a brief summary of your literature review and/or the theoretical foundations for your study.**
- 2. Explain the practical benefits and/or contribution of this research to the participants, to the Niagara Catholic District School Board and/or to the education system in general.**
- 3. Explain how this research aligns with the System Priorities of the Board and how this research benefits the priorities of the Board Strategic Plan.**

DATA COLLECTION AND/OR DATA REQUESTS

1. Describe how the data will be collected. Include the number of schools/sites required and the name of any preferred schools/sites. *Schools are not to be contacted prior to receiving approval.

2. How many students will directly participate?

Number of Students	Grade/Program	Time Required	Additional Details

3. How many teachers will directly participate?

Number of Teachers	Grade/Program	Time Required	Additional Details

4. How many other school personnel will directly participate?

Number of Staff	Staff Role	Time Required	Additional Details

5. Describe any other requests for data from the Niagara Catholic District School Board.

METHOD OF INVESTIGATION/STUDY

1. Provide a brief summary of your planned method(s) of data collection. List all data collection instruments (e.g., tests, surveys, interview guides etc.) and attach copies to this application.
2. Describe your plans for communicating to parents and participants about the research project. Explain your plans for obtaining *informed consent* for participation and your recruitment procedures. Attach copies of all information letters, consent letters and other communication materials to this application.
3. Briefly explain the data analysis procedures you will use for your research project.
4. List the security procedures in place for the protection of participant privacy and data storage.
5. What arrangements will you make for students who do not participate in your research?
6. What arrangements will you make for students requiring accommodations for participation?

ADDITIONAL REQUIREMENTS

- 1. Facilities required (e.g., quiet workspace; gymnasium; classroom)**
- 2. Assistance required (e.g., early access to room for set up; assistance with students)**
- 3. Other resources or special arrangements required**

PROVISIONS FOR FEEDBACK

- 1. Please describe your plans to report results to participants, participating schools and/or the Niagara Catholic District School Board:**
- 2. Describe any publication/speaking plans for this research (e.g., academic press; social media; online news; conference presentations):**

RESEARCHER OBLIGATIONS

- ☐ Inform the Principal of the participating school(s) and the Superintendent of Education responsible for research proposals of any significant change(s) in research activities, timelines, or design that makes the information in this form inaccurate. Written approval of changes is required before any changes may be implemented.
- ☐ Immediately notify the Principal of the participating school(s) and the Superintendent of Education responsible for research proposals of any breach of information.
- ☐ Notify the Superintendent of Education responsible for research proposals as soon as possible of any concerns encountered with a participating school, staff, students or parents.
- ☐ Share the results of the research with participating administrators and staff. This can be in the form of a written report or presentation that defines the research results.
- ☐ Upon completion, provide an executive summary/final report to the Superintendent of Education responsible for research proposals.
- ☐ If requested, make a presentation to the Board.

SIGNATURE

- ☐ I have received and read the Niagara Catholic District School Board [External Research Administrative Operational Procedures \(Policy No. 800.5\)](#) about conducting research in the Niagara Catholic District School Board and agree to follow the requirements and guidelines if my application is approved.

Note that the final decision to participate in any research project always rests with the individual (e.g., principal, teachers, other staff; student through a parental consent form or a student assent form)

Name of Researcher (Print)

Signature of Researcher

Date

PROFESSOR/SPONSOR/AFFILIATED ORGANIZATION

This is to certify that the above-described research proposal has been reviewed by myself/my organization and has been vetted for its academic soundness. Consideration has been given to ethical, legal and moral questions arising from the proposal.

Name of Contact (e.g., sponsoring professor, director of organization):

Name of Organization:

Complete External Research Applications are to be sent to:

Niagara Catholic District School Board
Attention: Lee Ann Forsyth-Sells, Superintendent of Education
427 Rice Rd.
Welland, ON L3C 7C1
905.735.0240
Email: info@ncdsb.com