Application to Conduct Research in Irvine Unified School District

Irvine Unified School District (IUSD) recognizes the value of high-quality research in advancing the field of educational practice. All researchers interested in conducting research in IUSD are required to submit this completed Application along with the appropriate supporting documentation for consideration by the IUSD Research Committee. Any individual or entity seeking to conduct research in IUSD must adhere to the regulations set forth by federal and state regulations, relevant IUSD Board Policy, and the requirements described within this Application. Only proposals that are deemed to be well-designed, relevant to educational practice, and aligned to IUSD priorities will be considered for approval.

## considerations for approval:

The following elements will be used in the consideration of approval to conduct research in IUSD:

1. Significance to the field of education
2. Clear and immediate benefit to IUSD/school
3. Alignment with IUSD or school priorities: [Strategic Initiatives](https://iusd.org/about/our-district/strategic-initiatives) and [Continuous Improvement Efforts](https://iusd.org/continuous-improvement-efforts)
4. Time commitment for IUSD or school personnel
5. Minimal to no interruptions to instructional time
6. Adherence to IUSD policies and procedures regarding data privacy and security
7. Sensitivity of information collected
8. Adherence to IUSD policies and procedures regarding consent

If a request will require extensive data compilation, extraction, or programming to produce the record, the requestor shall bear the cost. The estimated cost will be provided along with the notice of approval to conduct the research.

A request for approval to conduct a research study or survey, with the exception of those mandated by law, shall be submitted to the IUSD Research Committee by the submission deadlines outlined on the [IUSD Research website](https://iusd.org/about/departments/education-services/data-and-assessment/conducting-research). Once the Application is reviewed, the requestor will be notified of the decision via email on the designated notification date.

## Application directions:

1. Complete the [research application and data schedule](#_research_Application:).
2. Review the [consent, data privacy, and security requirements](#_Consent,_data_privacy,). Provide a wet signature in the [certification statement box](#_Certification_Statement).
3. Attach IRB approval and copies of any consent forms, surveys, tests, interview questions, or other resources that will be used in your study.
4. Mail or e-mail all required documents to:

|  |  |
| --- | --- |
| Attn: IUSD Research Committee  Data and Assessment Department  Irvine Unified School District  5050 Barranca Parkway  Irvine, CA 92604 | Jennifer Mazzone  [JenniferMazzone@iusd.org](mailto:JenniferMazzone@iusd.org)  Phone: (949) 936 – 5299 |

## research Application:

Cells will expand while typing.

|  |  |
| --- | --- |
| Date of submission: |  |

|  |  |  |
| --- | --- | --- |
| Part I: Study Information | | |
| **Title of Project:** |  | |
| **Type of Application:** | Graduate Student: | Doctoral Dissertation  Master’s Thesis  Other |
| Professional Research: | University  Government Agency  Other |
| Seeking Letter of Endorsement for Grant: | Name funding agency: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Part II: Contact Information | | | | | |
| **Principal Investigator:** |  | | | | |
| **Title:** |  | | | | |
| **Organization/University:** |  | | | | |
| **Faculty Sponsor** (if applicable): |  | | | | |
| If IUSD Employee, Site & Title: |  | | | | |
| **Email Address:** |  | **Phone Number:** | |  | |
| **Address:** |  | | | | |
| **City:** |  | **State:** |  | **Zip Code:** |  |

|  |
| --- |
| Part III: Description of Research Study |
| **Purpose:**What is the purpose of this study? |
|  |
| **Research Questions:**What are your research questions? |
|  |
| **Benefit to Irvine Unified School District and/or the Field of Education:** What contributions or significance will the study have for IUSD and/or the field of education? |
|  |
| **Selection of IUSD:**Why have you selected IUSD as a potential research site? |
|  |
| **Brief Overview:**Briefly (in 200 words or less) describe the study. |
|  |
| **Timeline:**What are the proposed beginning and anticipated ending dates? |
|  |
| **Expected Date of Final Report:****Requirement:** A final report must be made available to the IUSD. |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Part IV: sampling Methodology | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Target Population:**Please identify the schools/locations where this study would be conducted and why these were selected.Include the number of schools and the names of the schools, if known.**Requirement:** Pseudonyms must be used. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Level(s) and Number of Schools: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pre-K | # |  | | | Elementary | | # |  | | Intermediate | | | # | |  | | High School | | | # | |  | District | # |  | |
| Details: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Subjects/Participants:**Describe the participants to be involved and the expected number of participants.**Requirement:** If parents are to be involved, translation materials may be required, and will be the responsibility of the researcher. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject(s) and Number of Participants: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Administrators | | | # |  | | Teachers | | # |  | | Students | # | |  | | Parents | | # |  | | Other, please specify | | | | # |  |
| Details: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Sampling/Selection:**Describe the procedures that will be used to select participants.Describe any recruitment plans, compensation, or participation incentives proposed.**Requirement:** Participation must be voluntary, individual responses must remain confidential. | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Time Commitment:**What is the approximate time required from each participant? Include the number of sessions, length of sessions, and interval between sessions, if applicable.Will there be any impact on instructional time? If so, what is the impact? | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Risk/Benefit:**What are the potential risks/hazards and expected benefits for the participants? | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Notification and Consent Procedures:**How will participants and parents/guardians be notified of this study?What consent procedures will be followed?**Requirement:** Certain topics require prior consent (see Consent Requirements): | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Institutional Review Board:**Please attach the institutional review board (IRB) approval or other human subject review board approval. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| IRB or similar approval attached | | | | | | | | | | | | | | | | | | | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| Part V: Data schedule & cOLLECTION PROCEDURES | | |
| **Data Collection procedures:** How will data be collected?What will be asked of participants?If applicable, who will administer the test/questionnaire and how will those be administered? | | |
|  | | |
| **Data Schedule:**Check off any types of IUSD/school/student data that will be collected as part of this study.Please attach any instruments, forms (including permission forms), questionnaires, surveys, or tests to be used to collect data.**Requirement:** When reporting data, personally identifiable information must be concealed. Data must be stored securely and confidentially. (See Data Security Requirements) | | |
| **Category of Data** | **Elements** | **Check if Data Will Be Collected** |
| Application Meta Data, In-App Performance & Use Statistics | IP addresses of users, use of cookies, etc. |  |
| Meta data on user interaction with application |  |
| Program/application performance (typing program-student types 60wpm, reading program-student reads below grade level) |  |
| Other application technology meta data – Please specify: |  |
| Assessments, Surveys & Work Samples | Standardized test scores – Please specify: |  |
| Observation data |  |
| Student responses to surveys or questionnaires |  |
| Student generated content; writing, pictures, etc. |  |
| Other assessment data or student work – Please specify: |  |
| Attendance | Student school (daily) attendance data |  |
| Student class attendance data |  |
| Communications | Online communications captured (emails, blog entries) |  |
| Conduct | Conduct or behavioral data |  |
| Demographics & Special Indicators | Data of Birth |  |
| Place of Birth |  |
| Gender |  |
| Ethnicity or race |  |
| English language learner status |  |
| Language information (native, or primary language spoken by student) |  |
| Medical alerts/health data |  |
| Student disability information |  |
| Specialized education services (IEP or 504) |  |
| Living situations (homeless/foster care) |  |
| Other demographic information – Please specify: |  |
| Enrollment & Course Schedule | Student school enrollment |  |
| Student grade level |  |
| Teacher name(s) |  |
| Student scheduled courses |  |
| Homeroom |  |
| Guidance counselor |  |
| Specific curriculum programs |  |
| Year of graduation |  |
| Academic or extracurricular activities a student may belong to or participate in |  |
| Other enrollment information – Please specify: |  |
| Parent/Guardian Information | First and/or last name |  |
| Address |  |
| Email |  |
| Phone |  |
| Parent ID number (created to link parents to students) |  |
| Student Identifiers & Contact Information | First and/or last name |  |
| Address |  |
| Email |  |
| Phone |  |
| Local (school district) ID number |  |
| State ID number |  |
| Provider/app assigned student ID number |  |
| Student app username |  |
| Student app passwords |  |
| Transcript | Student course grades |  |
| Student course data |  |
| Other transcript data – Please specify: |  |
| Transportation | Student bus assignment |  |
| Other transportation data – Please specify: |  |
| Other | Please list each additional data element used, stored, or collected as part of your study: |  |
| None | No Student Data collected at this time. Researcher will immediately notify LEA if this designation is no longer applicable. |  |

## Consent, data privacy, and security requirements:

### ConSent Requirements

|  |  |  |
| --- | --- | --- |
| Type of Consent | Description | Requirements |
| **None/Not Applicable** | The study does not involve any human participants.  The information collected through the study is pre-existing. | None |
| **Implicit Consent** | The study involves adult participants only.  By participating in the study, the adult is providing implicit consent. | Provide the [*IUSD* *Adult Implied Consent Form for Specific Activities*](#_IRVINE_UNIFIED_SCHOOL) to all invited adult participants. |
| **Active Consent** | The study involves student participants. | Requires prior written consent from a parent/guardian (or a student who is 18 years old).  A description of the study, the information collected, and the use of information must accompany the consent form.  Only students whose parent/guardian submits written consent will participate in the study.  Researchers must provide the [*IUSD* *Active Consent Form for Specific Activities*](#_IRVINE_UNIFIED_SCHOOL_1) to all parents/guardians of students invited to participate. |
| **Notification and Consent** | The study involves student participants.  The study involves one or more of the eight beliefs or practices listed below, an invasive physical exam, or collects information for marketing purposes. | Requires prior notice and written consent from a parent/guardian (or a student who is 18 years old).  Before the administration of a research study about beliefs or practices, involving an invasive physical exam, or the collection of information for marketing purposes, a parent/guardian may inspect the materials prior to providing consent.  Only students whose parent/guardian submits written consent will participate in the study.  Provide the [*IUSD Notification and Consent Form for Specific Activities*](#_IRVINE_UNIFIED_SCHOOL_2)*,* along with the anticipated date of survey administration and copies of all survey or study materials for parents/guardians of students invited to participate. |

### Notification and Consent

Studies for, or on behalf of, educational agencies or institutions may only be conducted for the purpose of developing, validating, or administering predictive tests, administering student aid programs, and improving instruction. A research study containing one or more of the following will require prior written consent from parents/guardians (or a student who is 18 years old). Before the administration of a research survey, study or evaluation about beliefs or practices, a parent/guardian may inspect the materials and/or refuse to allow the child to participate in the study.

1. Political affiliations of beliefs of the students or his/her family
2. Mental or psychological problems of the student or his/her family
3. Sexual behavior or attitudes or personal beliefs and practices in family life or morality
4. Illegal, anti-social, self-incriminating, or demeaning behavior
5. Critical appraisals of other individuals with whom students have close family relationships
6. Legally recognized privileged or analogous relationships, such as those of lawyers, physicians, or ministers
7. Religious practices, affiliations, or beliefs of the student or his/her family
8. Income, except to the extent that income is required to be disclosed by law for participation in a program or for receiving financial assistance under such a program (Note: questions pertaining to free/reduced-price meal eligibility are prohibited)

If a student participated in a research study or survey regarding information about beliefs and practices as identified in 1-8 above, the student’s personally identifiable information, individually or in aggregate, shall not be disclosed.

Parents/guardians (or students who are at least 18 years old) shall be given the notice and must provide written consent for the collection of the following information:

1. Any research study or survey regarding information about beliefs and practices as identified in 1-8 above, regardless of funding;
2. Any non-emergency, invasive physical exam or screening required as a condition of attendance, administered by the school or its agent and scheduled by the school in advance, and not necessary to protect the immediate health and safety of a student, except for hearing, vision, or scoliosis screenings, or any physical exam or screening permitted or required under State law; and
3. Activities involving collection, disclosure, or use of personal information obtained from students for marketing or to sell or otherwise distribute the information to others.

### data PRIVACY AND security Requirements:

Researchers shall familiarize themselves with and agree to abide by the terms of all applicable laws and IUSD policies and procedures regarding data privacy and security, including California Education Code section 49076(a) (2) (E) & 451125.1 & 49073.1, United States Code of Regulations sections 34 CFR Part 99, 1232h, 15, 6501-6506 (16 C.F.R. Part 312), and California Bus. & Prof. Code section 22584.

All researchers must sign in to the visitor kiosk in the front office prior to entering school grounds, and must be supervised by an IUSD employee at all times while on campus.

The studies must be conducted in a manner that will not permit the personal identification of pupils or their parents by persons other than representatives of the organization.

Use of the information and or documentation collected is limited to the specific educational context for which it was collected and may not be shared with third parties or otherwise be disclosed to them unless they have agreed to be bound by these same Data Privacy and Security Requirements. Under no circumstances may information collected from students be used for marketing purposes or distributed on social media without prior written consent from the student's parent or guardian. When it is no longer needed for the purpose for which it was obtained, or upon request from the IUSD, all researchers shall return all documents and destroy all personally identifiable information obtained from students. Data disaggregated and deidentified to the IUSD’s satisfaction may be retained by the researcher.

Researcher will implement reasonable and typical administrative, technical, and physical safeguards in an effort to secure its facilities and systems from unauthorized access and to secure Confidential Information and User data or Student Data subject to California Education Code section 49073.1 (collectively, “IUSD Content"). Researcher agrees to only use or disclose personal information records created or received from, by, or on behalf of IUSD for the purposes of this Application. For the avoidance of doubt, personally identifiable information includes any information that, either alone or in aggregate, would allow a reasonable person to be able to identify a student to a reasonable certainty. Researcher will not disclose IUSD Content to a third party (including law enforcement, other government entity, or civil litigant) except as directed by IUSD or unless required by law. Should a third-party contact Researcher with a request for IUSD Content, Researcher will redirect the third party to request the data directly from IUSD.

Upon becoming aware of: (a) any unlawful or unauthorized access to IUSD Content stored on equipment used by Researcher or in facilities used by Researcher (each a “Security Incident”), Researcher will: (i) promptly notify IUSD of the Security Incident in a timely manner; (ii) promptly investigate the Security Incident and provide IUSD with detailed information about the Security Incident, including the identity of affected Users for notification purposes; and (iii) take commercially reasonable steps to mitigate the effects and to minimize any damage resulting from the Security Incident. Following the occurrence of a Security Incident, Researcher will take commercially reasonable, prompt, and appropriate corrective action aimed at preventing the reoccurrence of a similar Security Incident in the future.

This Application may be rescinded and terminated by the District in the event the Researcher materially breaches the terms of this Application and said breach is not cured within thirty (30) days after receiving notice by the District Researcher will hold the District harmless from any lawsuit, claim, or damages arising from the Researchers’ work pursuant to or arising from this Agreement, save to the extent caused by for the active negligence or intentional conduct of the District.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Certification Statement In submitting this Application, I certify that the Application is an accurate and complete description of my proposed research study. I assure Irvine Unified School District that the research activities to be conducted are in compliance with all existing legal and ethical codes, regulations, as well as the Federal Policy for the Protection of Human Subjects, the Special Protections for Children Involved as Research Subjects, Family Educational Rights and Privacy Act, and Protection of Pupil Rights Amendment. Furthermore, I assure that all data collected for this study will be kept confidential in compliance with the Federal Educational Rights and Privacy Act. The approval to conduct research does not obligate any school, staff, student, or parent to participate, as all participation remains voluntary. I also agree to share my final report and findings with IUSD no later than one year following the conclusion of the research. My signature below constitutes acceptance of the terms and conditions specified in this Application. | | | | |
|  | Signature of Principal Investigator |  | Date |  |

## Sample consent forms:

### IRVINE UNIFIED SCHOOL DISTRICT ADULT IMPLIED CONSENT FORM FOR SPECIFIC ACTIVITIES

**Page 1 of 1**

Irvine Unified School District (IUSD) recognizes the value of high-quality research in advancing the field of education. In our partnerships with educational researchers, we maintain our primary responsibility to the students, parents, and staff whom we serve within IUSD. This letter accompanies an educational research study in which you have been invited to participate. As an adult, any voluntary participation in this study and the related activities implies your consent to participate. If you have any questions regarding this study, please contact the principal investigator or your site administrator.

*[NOTE – this is a sample format, which must be tailored for each activity]*

**Date**:

**Grade(s)**:

**Activity**:

**Principal Investigator:**

**Principal Investigator Contact Information:**

**Summary**:

*[Insert a brief summary of the purpose of the study, the activities the participants will be involved in, what information will be collected, and how that information will be used.]*

If you have any questions regarding this study, please contact the principal investigator or your site administrator.

### IRVINE UNIFIED SCHOOL DISTRICT ACTIVE CONSENT FORM FOR SPECIFIC ACTIVITIES

**Page 1 of 2**

Irvine Unified School District (IUSD) recognizes the value of high-quality research in advancing the field of education. In our partnerships with educational researchers, we maintain our primary responsibility to the students, parents, and staff whom we serve within IUSD. This consent form accompanies an educational research study in which your child has been invited to participate. All participation is voluntary and contingent upon returning the attached consent form. If you have any questions regarding this study, please contact the principal investigator or your site administrator.

The following activity requires parental consent. (Please note that consent transfers from parents to any student who is 18 years old or an emancipated minor under State law.)

*[NOTE – this is a sample format, which must be tailored for each activity]*

**Date**:

**Grade(s)**:

**Activity**:

**Principal Investigator:**

**Principal Investigator Contact Information:**

**Summary**:

*[Insert a brief summary of the purpose of the study, the activities the students will be involved in, what information will be collected, and how that information will be used.]*

If you have any questions regarding this study, please contact the principal investigator or your site administrator.

**Page 2 of 2**

A parent/guardian must sign and return the consent below no later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ so that your child may participate in this study.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give my consent for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in the *[INSERT STUDY NAME]* on or about *[DATE]*.

Please return this form no later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the following school official:

*[NAME]*

*[TITLE]*

*[DEPARTMENT]*

*[ADDRESS]*

*Signature*

*Name (printed)*

*Date*

### IRVINE UNIFIED SCHOOL DISTRICT NOTIFICATION AND CONSENT FORM FOR SPECIFIC ACTIVITIES

**Page 1 of 3**

Irvine Unified School District (IUSD) recognizes the value of high-quality research in advancing the field of education. In our partnerships with educational researchers, we maintain our primary responsibility to the students, parents, and staff whom we serve within IUSD. This notice and consent form accompanies an educational research study in which your child has been invited to participate. All participation is voluntary and contingent upon returning the attached consent form. If you have any questions regarding this study, please contact the principal investigator or your school site administrator.

The Protection of Pupil Rights Amendment (PPRA), 20 U.S.C. § 1232h, requires the Irvine Unified School District (“District”) to notify you and obtain consent before your child participates in certain school activities. These activities include a student survey, analysis, or evaluation that concerns one or more of the following eight areas (“protected information surveys”):

1. Political affiliations or beliefs of the student or student’s parent;
2. Mental or psychological problems of the student or student’s family;
3. Sex behavior or attitudes;
4. Illegal, anti-social, self-incriminating, or demeaning behavior;
5. Critical appraisals of other individuals with whom respondents have close family relationships;
6. Legally recognized privileged or analogous relationships, such as those of lawyers, doctors, or ministers;
7. Religious practices, affiliations, or beliefs of the student or the student’s parent;
8. Income, other than as required by law to determine program eligibility.

This parental notification requirement and consent also apply to the collection, disclosure or use of personal information collected from students for marketing purposes (“marketing surveys”). Additionally, the notice requirement applies to the conduct of certain physical exams and screenings. This includes any non-emergency, invasive physical exam or screening required as a condition of attendance, administered by the school or its agent and scheduled by the school in advance, and not necessary to protect the immediate health and safety of a student. This does not include hearing, vision, or scoliosis screenings, or any physical exam or screening permitted or required by State law. Please note that parents are not required by PPRA to be notified about the collection, disclosure, or use of personal information collected from students for the exclusive purpose of developing, evaluating, or providing educational products or services for, or to, students or educational institutions.

**Page 2 of 3**

The following activity requires parental notice and consent. IUSD will provide parents, within a reasonable period of time prior to the administration of the surveys and activities, notification of the surveys and activities, as well as an opportunity to review the surveys. (Please note that this notice and consent transfers from parents to any student who is 18 years old or an emancipated minor under State law.)

*[NOTE – this is a sample format, which must be tailored for each activity]*

**Date**:

**Grades**:

**Activity**:

**Principal Investigator:**

**Principal Investigator Contact Information:**

**Summary**:

*[Insert a brief summary of the purpose of the study, the activities the students will be involved in, what information will be collected, how that information will be used and copies of all survey materials.]*

Please see the attached copies of all survey material prior to providing consent for your child to participate.

If you have any questions regarding this survey, please contact the principal investigator or your site administrator.

**Page 3 of 3**

A parent/guardian must sign and return the consent below no later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ so that your child may participate in this survey.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have reviewed all survey material related to this study.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give my consent for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in the [INSERT SURVEY NAME] on or about [DATE].

Please return this form no later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the following school official:

[NAME]

[TITLE]

[DEPARTMENT]

[ADDRESS]

*Signature*

*Name (printed)*

*Date*

00203-00005/808906.1