ILLINOIS STATE UNIVERSITY LABORATORY SCHOOLS
RESEARCH APPLICATION

1. Researcher receives a *Laboratory School Research Project Application* from Metcalf, University High School, or the College of Education Research websites and the *IRB Use of Human Subjects* form from the Institutional Review Board Office.

2. After the IRB approval, the researcher completes and returns the Laboratory School Research Project Application to the building research coordinator.

3. The researcher must comply with Illinois State University's Protection of Minors Policy. https://policy.illinoisstate.edu/conduct/1-19.shtml

4. The building research coordinator and/or administration reviews the research application to determine whether or not the researcher(s) should be granted access to Laboratory School populations, works with the researcher on revisions, if necessary, and makes recommendations for scheduling the research.

5. Research may begin after final notification by the building research coordinator.

6. Researcher may be required to share findings with faculty, if applicable.

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RESEARCH APPLICATION

PROJECT IDENTIFICATION

Title of Project: _____

_____

_____

_____ Approved IRB attached

_____ Completed background check in accordance with Illinois State University's Protection of Minors Policy

Principal Investigators:

_____

Name   Dept.   Phone   E-mail

_____

Name   Dept.   Phone   E-mail

Sponsor's approval, if appropriate: _____
(All graduate students need a sponsor's signature.)   Signature

TIME PROJECTIONS

Anticipated start date: _____

Anticipated completion date: _____

LABORATORY SCHOOL PERSONNEL INVOLVEMENT

Number and grade level of pupils: _____

Unique characteristics of requested subjects:

_____

_____

Will the subjects be studied as individuals or in groups? _____

Time needed per session: _____   Number of sessions: _____   Total minutes: _____

Will you request access to any data in the student files?   Yes _____   No _____

If "Yes," please list the specific information needed: _____

_____

Will persons other than pupils be used?   Yes _____   No _____

If "Yes," please indicate who and how. Please explain: _____

_____

LABORATORY SCHOOL FACILITIES INVOLVEMENT

Building(s) and Rooms(s): _____

Equipment: _____

_____

Materials: _____

_____

(Equipment and materials are the responsibility of the researchers.)

Conditions of Approval

As a condition of approval to conduct research, researchers may be required to provide information which can benefit educational practice in the Laboratory Schools. Therefore, if requested, the researcher agrees to provide one of the following: (1) A briefing to the teachers and staff on the results of the research; (2) A workshop or seminar related to the research results that could help improve instruction; and (3) A final report. The researcher will consult with the principal at the conclusion of the research to determine the feedback format most preferred by the school faculty.

I agree to acknowledge the Laboratory Schools (Metcalf or University High School) as the site of this research in publications and/or presentations and provide a copy of published or presented material to the building principals.

I understand that my proposed timeline and proposal may need to be altered to coordinate with the needs
of the lab school students.

I agree to keep strictly confidential all laboratory school student records to which I may have access. I further stipulate that any report of my results will be written so that the individual student data are not identifiable.

I acknowledge that failure to comply with these guidelines may result in the loss of research privileges in the Laboratory Schools.

_____ Date _____
Signature of Principal Investigator

_____ Date _____
Signature of Co-Investigator

Return a completed copy of this application to the building research coordinator:

Metcalf Laboratory School   OR   Shannon Maney-Magnuson

Illinois State University   University High School

Campus Box 7000   Illinois State University

Normal, IL 61790-7000   Campus Box 7100

Normal, IL 61790-7000

___ Approved

_____   ___ Disapproved

Signature of Building   Date

Research Coordinator

___ Approved

_____   ___ Disapproved

Signature of Building   Date

Principal

Comments by building research coordinator and/or administrators, if appropriate: