



Administrative Form 1015Fa

Research Application

Administrative Procedures Cross Reference:

[Conducting Research in the Brandon School Division](#)

Date Amended: May 2019

Brandon School Division welcomes researchers and appreciates the efforts to support student achievement. Numerous applications for research are received annually and we regret that not all projects can be accommodated. The Research Advisory Committee **will not consider** incomplete applications. It is the responsibility of the researcher to ensure that the essential information necessary for the Committee to make an informed decision is provided in the application. Administrative Procedure 1015 outlines the requirements.

1. Overview

Date of application: _____

Title of research: _____

Proposed start date: _____ End date: _____

Research Level:

Faculty Research

Doctoral Research

Master's Research

Undergraduate Research

Summary of primary research question/focus:

Alignment with BSD priorities:

Complete if applicable:

Name of sponsor/thesis advisor: _____

Email: _____ Telephone: _____

Position: _____

Department: _____

Institution: _____

2. Applicant Information

Primary researcher: _____

Address: _____

Telephone: _____

Email: _____

Position title: _____

Institution/Organization: _____

Other researcher (1): _____

Address: _____

Telephone: _____

Email: _____

Position title: _____

Institution/Organization: _____

Other researcher (2): _____

Address: _____

Telephone: _____

Email: _____

Position title: _____

Institution/Organization: _____

Other researcher (3): _____

Address: _____

Telephone: _____

Email: _____

Position title: _____

Institution/Organization: _____

Research Assistant or anyone else involved in data collection:

Name: _____

Email: _____

Affiliation: _____

3. Ethics Approval - required

Attached: yes no

Comments:

4. Research Study Information

Copies of all questionnaires, testing instruments, and informed consent letters are required.

Research question and objectives:

Research design and methods of data collection:

List of research tools (programs, questionnaires, etc. – all questionnaires attached)

Locations/facilities:

Participants and recruitment:

	Students	Staff
Number of participants		
Required demographics (age range, gender proportion, etc.)		
Method of recruitment		
Number of sessions:		
Approximate length of each session:		
Maximum length of each session:		
Testing procedure: individual vs. group		

	Students	Staff
For group testing, indicate approximate size of group(s):		
How will consent be obtained?		
Consent forms attached (required)		

Will data include any information regarding subject's:

sexual behaviour

alcohol use

drug use

religion

ethnicity

family income

other sensitive information:

If any of the above are checked, please explain:

5. Assessment of risk and benefits

Conflict of Interest

- Describe any real or perceived conflict(s) of interest for any research team member that could affect participant welfare:

- How will you manage the conflict with regard to the research?

- Is there any relationship (current, pre-existing, or expected) between the researcher(s) and the participants (e.g. instructor/student; manager/employee; co-workers; family members; intimate relationships)?

- If yes, please describe any safeguards and/or procedures to prevent possible undue influence, coercion or inducement given the power differential

Risk to Participants

- List and indicate how they will be managed

Potential Benefits

- To participants

- To Brandon School Division

- To field of research

- To field of education

- To general community

- To scientific community

Confidentiality and Data Security

- What process are you using to protect the anonymity and confidentiality of your subjects?

- How are you securing the data in your research?

I have read Administrative Procedure 1015 – Conducting Research in the Brandon School Division and agree to the conditions under which research requests are granted by the Division.

Name of Primary Researcher: _____

Signature of Primary Researcher: _____

Date: _____

Name of Faculty Member/Thesis Advisor: _____

*Signature of Faculty Member/Thesis Advisor: _____

Date: _____

*If the Primary Researcher is a student, this application must be countersigned by the student's thesis advisor at the college or university to indicate that the advisor has read the proposal and deems it a valid and worthwhile research project.

Please submit completed applications to:

Office of the Superintendent/Chief Executive Officer
Brandon School Division
1031 – 6th Street
Brandon, MB R7A 4K5

Office Use:

Research Application

Copies of all questionnaires and testing instruments

Copies of informed consent letters for students (if applicable)

Copies of informed consent letters for teachers (if applicable)

Copies of informed consent letters for parent/guardian (if applicable)

Ethics approval