# Loudoun County Public Schools Research Request Form

Office of Research

21000 Education Court

Ashburn, VA 20148

Fax: 571-252-1633 Voice: 571-252-1310

Please complete and email with supporting documentation to the Research Office: research@lcps.org.

Allow 4-6 weeks for internal review of the request. Any action regarding this research request may not be conducted without prior approval and written authorization. For more information contact staff in the Research Office. NOTE: Proposals will not be accepted or reviewed during the month of August.

**Name: Date of Request:**

**Address:**

**City: State: Zip Code:**

**Telephone:**

**Email:**

**Description of Research Request:**

Please describe the research study in as much detail as possible in order to facilitate the review process. Each of the following areas must be addressed in the request or the form will be returned incomplete.

* Purpose of Study
* Methodology
* Subjects/participants
* Instruments
* Length of Study
* Data Analysis
* Proposed communication of results
* Potential for publication
* Benefits to Loudoun County Public Schools
* Confidentiality and anonymity statements
* Dissertation proposals please attach the first three chapters

Please attach any pertinent documents such as survey instruments, tests and/or protocols to be used in this study.

**University/College Affiliation:**

**Principal Investigator’s and/or Supervising Professor’s Name and Email:**

**Course Number and Course Title (if appropriate):**

**Program of Study (if appropriate):**

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**Print Name Signature**