EGA-R

# Research Studies

Individuals proposing to conduct research in the District will adhere to the following guidelines:

1. Researchers must provide the District a completed form that stipulates the purpose of the research to include objectives, if any; the proposed dates the research will be conducted and concluded; who will conduct the research; contact information for the person(s) conducting research; proposed copies of instruments to be used and letters of parent permission in English and Spanish to guarantee student anonymity; database files needed; any special data fields needed that may not exist currently; on-site observations, interviews, or surveys if applicable; explanation of how the data will be kept and analyzed; characteristics of the data that guarantee student anonymity; anticipated disruptions to campus life if any; a description of how the data will be reported; and notification of how and when the data will be destroyed.

   Anonymous data available in the Texas Academic Performance Reports needs no approval.

2. Researchers must sign a Confidentiality Agreement and a Research Agreement to ensure they will adhere to FERPA and District Guidelines.

3. Researchers must provide a signed copy of IRB approval from the institution they are doing research from if IRB approval is needed by that institution.

4. Researchers must consent to a background check and provide a legible copy of their US driver's license for each individual that will be interacting with District students.

5. Researchers must provide the name of the affiliation of the research group and, if pertinent, any subcontracted agreements by which it is offered entry into the District to conduct research.

6. Once approval has been granted, the researcher(s) are responsible for contacting the appropriate campus(es) and/or department administrator for participation.

7. A denied research request may be amended jointly between the requesting institution and Department of Innovation, Assessment, and Analytics until it is accepted.

8. Appeal of a denied research study request may be directed to the Board of Trustees.

INNOVATION, ASSESSMENT, AND ANALYTICS

# Research Agreement

By signing below, I understand and agree to the following conditions:

- That no identifying information will be released without the express consent of all participants;
- That all participants, regardless of age, and parents be given a consent form, and that I provide samples of the consent forms before I begin my study;
- That the District's name not be used when I publish my findings without previous consent in writing;
- That I keep the Department of Innovation, Assessment, and Analytics apprised of my progress through updates throughout the duration of my project;
- That I provide the Department of Innovation, Assessment, and Analytics a copy of the final report/results of my research; and
- That to the best of my efforts will not present the District in a misleading or negative fashion.

_____ _____

Signature Date

# Confidentiality Agreement

The Ysleta Independent School District will keep all student information anonymous and confidential as required by FERPA, the Family Educational Rights Privacy Act of 1974 and by District Policy EGB. This document is an extension of the application (preceding page) to conduct research in the district.

The user identified below promises to create a unique identifier for each participant in the sample and once created, to delete any and all original identifiers (ex. name, PEIMS ID, date of birth) from any data set (electronic or paper). Uniquely identified data will then be kept locked in such a way that only the project manager or designee (named in application) will have access to them. All data will be destroyed at the conclusion of the project or at a time shortly after the conclusion.

This date is anticipated to be _____.

No portion of any data file is to be copied or transferred from the secure server or confidential paper data file to a secondary company/agency.

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I, _____, have read the above procedures for protecting the confidentiality of individual records and agree to abide by the procedures while using data from the Ysleta Independent School District, El Paso, Texas.

_____ _____

Signature Date

_____ _____

Signature Date

INNOVATION, ASSESSMENT, AND ANALYTICS

# Background Check

Dear Researcher:

It is necessary to obtain the information contained by the Computerized Criminal History database maintained by the Texas Department of Public Safety (or similar agency if out of state). This data is requested of all researchers who will have contact with students at the Ysleta Independent School District. Please provide a legible copy of a U.S. ID. This action is pursuant to the Texas Education Code Section 22.083.

Thank you for your cooperation.

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Authorization to Conduct Background Check

I, _____, the undersigned, a researcher who would like to observe, interview, survey, or otherwise have contact with students in the Ysleta Independent School District as part of my research project, do hereby authorize the District to obtain any criminal history information that relates to me. The authority is given pursuant to Section 22.083 of the Texas Education Code.

Please briefly describe your project and the interaction you will have with students.

_____

_____

_____

_____ _____

Legal Name Maiden Name

_____ _____

Social Security Number Date of Birth

_____ _____

Street Address Driver's License # / State / Expiration Date

_____ _____

City / State / Zip Signature of Applicant

_____

Phone Number

**THIS FORM IS NOT TO BE USED AS A CONSENT/AUTHORIZATION FORM.**
Agency to retain this CCH Verification Form for DPS auditing purposes.

# DPS Computerized Criminal History (CCH) Verification Form

**Section 1:** Applicant must acknowledge the information in Section 1. Signature & date required.

Applicant Name (Print):

I acknowledge that a Computerized Criminal History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411, Subchapter F https://statutes.capitol.texas.gov/.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is **not** allowed to discuss with me any CHRI obtained using the name and DOB method.

If you would like to request your own personal review please see the following information. A personal Computerized Criminal History review will not be used for employment purposes.

**Optional Only**: If the agency directly requests that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search, I can make an appointment with the Fingerprint Applicant Services of Texas (FAST) by visiting the Crime Records General Information | DPS (texas.gov) *Review of Personal Criminal History* or call the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of $25.00 to the fingerprinting services company. Once this process is completed the information on my fingerprint criminal history record may be discussed with me. *PERSONAL REVIEWS WILL NOT BE VALID FOR EMPLOYMENT PURPOSES*

| Applicant Signature: | Date: |
|---|---|

Sign and date to acknowledge the statement above.

**Section 2:** Agency use only. Must be completed by authorized personnel conducting search.

Agency Name: Ysleta Independent School District

Authorized Searcher:

Signature of Authorized Searcher:

Date of Search:

**Section 3:** Agency use only. Name Based CHRI /CCH Tracking information. Check all that apply.

| | |
|---|---|
| Purpose for CHRI Search. | ☐ Applicant ☐ Volunteer ☐ Contractor ☐ Other: |
| Is any part of CHRI stored by agency? | **Reminder: DPS does not recommend storing any part of CHRI.** ☐ NO, CHRI is not stored by agency. ☐ YES, CHRI is stored by agency. |
| CHRI Retention Period | ☐ Temporarily Only ☐ Annual ☐ None Stored/Saved ☐ Other: |
| CHRI Storage Method | ☐ Physical/Printed (paper copy) ☐ Digital/Electronic (on device/computer) |
| CHRI Retention Purpose | Explain: |
| Date CHRI Destroyed | **Reminder: CHRI must be destroyed after authorized purpose has ended.** |
| Destruction Method | Explain: |

CHRI + Audit Resources (CJIS Launch Pad) link

Form provided by DPS Crime Records Division Audit & Training Unit for agency use.
Revised 6/01/2025