



Dear Applicant:

(REVISED APRIL 2016)

We appreciate your interest in conducting educational research in Miami-Dade County Public Schools (M-DCPS). Because M-DCPS is one of the largest and most progressive school systems in the nation, we routinely receive numerous requests to conduct education related research. Consequently, we have developed a formal process to review these requests AND also to comply with the School Board rule **2605** which states that ***"All requests to conduct testing or other research from persons or organizations outside the school system shall be submitted for approval to the Research Review Committee (RRC)"***

The Board rule continues to state that ***"The RRC is responsible for determining the acceptability of the request in terms of the proposal's technical competence, lack of duplication of other ongoing research, significance to the District, and compatibility of its use of resources with potential benefits to the District"*** by using a well-defined review process. To that end, we ask you to please submit a formal request to the District's RRC and we will do our best to provide you with a response as soon as possible. The application forms can be found at the following link:

<http://oer.dadeschools.net/ResearchReviewRequest/ResearchReviewForms.pdf>

Please note that even after the RRC approves the study, it is still the responsibility of the Principal as the gatekeeper of the school to participate or not. As stated in the Board rule, ***"...the principal of the individual school may decide if committee-approved outside research will be conducted within his/her school."***

The review process takes approximately four weeks; however, delays occasionally occur. The most common stems from the parent permission form. If your research will involve students, you must submit a copy of the parent consent form. Additionally, if the research will involve visits to the schools, **an applicant who is not a current M-DCPS employee must first obtain a security clearance from the district.** This involves a background check based on the applicant's fingerprints. Also since the RRC is NOT an IRB, we request that you seek an IRB approval for your study and submit a copy of the IRB approval letter. This is especially necessary if the applicant is conducting his/her research to fulfill the requirements of a thesis or dissertation at a degree granting institution.

Good luck with your request and your subsequent research. If you have any questions or if you need assistance during the review process, please contact me or Ms. Betty Figueroa at 305-995-7512.

Sincerely;

Dr. Tarek Chebbi
Chairperson, Research Review Committee

**Miami-Dade County Public Schools
RESEARCH APPLICATION INSTRUCTIONS
Research Review Committee**

Applications to conduct research in the Miami-Dade County Public Schools must be reviewed and approved by the Research Review Committee. The following instructions will a) identify the forms/documents that must be submitted to the committee, b) describe the general procedures of the review process, and c) provide some useful information.

I. The application consists of the following forms/documents:

- A. Applicant Identification Form (Appendix A) – submit one copy**
- B. Research Review Form (Appendix B) – submit two hard copies (paper).**
- C. Prospectus – submit two hard copies (paper).**
- D. *** Copy of the IRB approval letter from your University (Especially for Dissertation Thesis)**
- E. Copy of Instruments (Surveys, Questionnaires, Tests, etc....)**
- F. Copy of Consent Forms (See Sample in Appendix C)**
- G. ALL applicants must submit ONE electronic PDF file containing ALL documents that are in the Paper copy (Including Appendix A, Appendix B, IRB letter, Brief summary of the study, Consent forms, Data collection instruments, etc...)**

The file must be named using the following naming convention

RRC_9999_LastName_FirstName_YYYY

- ✓ Last name and First Name of the Applicant
- ✓ YYYY the 4 digits of the year (e.g. 2017)

The PDF file should be emailed to bfigueroa@dadeschools.net

II. The Brief summary includes the following information/documents:

- A. Statement of the research problem**
- B. Literature review supporting the research problem and the questions/hypotheses to be addressed**
- C. Explicit statement of the questions/hypotheses to be addressed and the variables to be analyzed**
- D. Description of the research design and method of analysis to be employed in the study**
- E. If applicable, provide copies of any instrument (e.g., survey, test) which will be used in the study.**
- F. If the research study will involve students, an **active parent permission** form must be provided. A **passive consent form is not acceptable**. The parent permission form must:**

- 1) State the purpose of the research.
- 2) Identify ALL the data that will be collected on the student. Include both data that will be collected by the study and data retrieved from archives (e.g., school records).
- 3) Indicate the timelines, and the amount of time required of the students.
- 4) Identify the researcher, including address, phone number, and institution.
- 5) Provide a clear space for the student's name and his/her signature.
- 6) Provide the parents **two signature lines: One** giving permission and **one** refusing it. The parent will sign and date the form. (See Appendix C for a sample consent form).

G. If data are drawn from a student's records at his/her school, a completed Permission for Release of Records and/or Information from Records form (FM 1867) must be retained in the student's cumulative folder.

- 1) The FM 1867 form, like the parent permission form, must be signed by the student's parents.
- 2) The FM 1867 form will be provided to the applicant by the district.

III. The Review process involves:

A. Copies of the application (except the Identification page) will be forwarded to the members of the Research Review Committee (RRC).

B. The composition of the RRC depends on the nature of the research. Generally will include at several members:

- A parent permission reviewer to insure that the rights of the participants are protected
- A principal from the school level targeted by the research
- A subject area specialist to insure that the proposed research is appropriate and justified
- An evaluation specialist to insure that the methodology of the research is appropriate
- The chairperson of the committee to oversee the process and to serve as the only contact with the applicant.

C. The committee members rate the application. The identity of the applicant is generally withheld from the members providing a rating (do not include your name in the prospectus). The rating is based on two factors:

- 1) **Validity of the research** – Is the problem well defined? Are the questions/hypotheses well developed and pertinent to the problem? Is the literature review complete? Is the method of analysis appropriate? Can the research accomplish its intended purpose?
- 2) **Utility of the research to MDCPS** – Is the intrusiveness of the research outweighed by its potential benefit to the district? Are the research activities compatible with the public school setting? Is the research compatible with the district strategic goals and objectives?

D. Based on the ratings of the application, a decision is made as follows:

- 1) The application is approved as submitted.
- 2) The application is conditionally approved, (A revised application will be submitted to the chairperson, after specific changes have been made)
- 3) The application is not approved.

E. The chairperson notifies the applicant of the committee's decision.

IV. Data collection and research activities- In this phase please consider the following:

A. The approval of the committee does not constitute an endorsement of the research. It is simply a permission to request the voluntary cooperation in the research of individuals associated with the MDCPS.

B. If the research activities will involve the staff/students of a school during school hours, the approval of the principal must be secured before the voluntary cooperation of the staff/students is sought.

C. Before engaging in research activities in a school, an applicant who is not a current MDCPS employee must obtain a security clearance from the district. This involves a background check based on the applicant's fingerprints. The background check takes few days and its cost is borne by the applicant. Once cleared, the applicant is issued a clearance letter that he/she must submit to the RRC to get the approval to conduct research in M-DCPS (**See Appendix D**).

D. The disruption of a school's routine by the research activities must be kept at a minimum. Avoid scheduling activities during the beginning or end of the school year, and during periods of districtwide testing.

E. If the research involves data from the MDCPS databases, such data will be provided if:

The data are not confidential in nature.

The provision of the data does not interfere with the district's routine schedule of work.

Any cost incurred in the provision of the data is borne by the applicant.

Important:

- 1. The data (from MDCPS databases) that was provided to the researcher must be destroyed completely when the approval expires.**
- 2. The data provided can't be shared with a third party without a specific written permission from the chair of the Research Review Committee.**

V. Timelines – Please be aware of the following:

A. The review of the application takes approximately four weeks. It may take longer during holidays, summer months, and busy periods like the beginning or end of the school year.

B. The approval of an application is valid for a specific period of time. The expiration date for the approval will be based on the information provided by the applicant.

VI. Communication and distribution of forms/documents- Please be aware of the following:

A. All communication between the applicant and the Research Review Committee will occur through the chairperson. The chairperson's address and telephone numbers are the following:

Dr. Tarek Chebbi, Chairperson
Research Review Committee
1450 N.E. Second Avenue, Suite 222
Miami, Florida 33132
Phone 305-995-7529

- B.** Occasionally, an applicant may need background information on the school system. Documents distributed by the Citizen Information Center of the MDCPS include information on various aspects of the school system's operation. These documents are available at a minimal cost to cover reproduction. The center's address and telephone number are the following:

Citizen Information Center
1450 N.E. Second Avenue, Room 102
Miami, Florida 33132
Phone 305-995-1128

- C.** A wealth of information on the school system's operation is available on its Web site. The address of the site is the following: <http://www.dadeschools.net/>
- D.** Additionally, the current phone numbers and addresses of most MDCPS offices and schools are readily available in the Miami Business section (white pages) of the Greater Miami Telephone directory. This information is also available from the MDCPS information operator at 305-995-1000.
- E.** Correspondences connected with the application or the subsequent research activities must not utilize the MDCPS internal mail system, even if the applicant is an employee.

VII. Finally, please note that:

- A.** A successful applicant will be issued a letter containing the conditions of the approval and an approval number. Copies of the letter should be provided to the principals of the MDCPS schools involved in the research. The approval number should be used in all communications to clearly identify the research as approved by the Research Review Committee.
- B.** If the applicant is not a current MDCPS employee and the research activities will involve visiting a school, the following documents must be presented to the principal:
- A copy of the approval letter for the study
 - A copy of the applicant's security clearance letter (see IV, C)
 - A photo identification (e.g., Florida driver's license)
- C.** At the completion of the research, an abstract of the findings must be submitted to the committee. Furthermore, as a condition of the approval, the committee retains the right to receive upon request the complete report.

Appendix A
(Revised April 2016)

Miami-Dade County Public Schools
APPLICANT IDENTIFICATION FORM
Research Review Committee

Submit only ONE copy of this Identification Form

Miami-Dade County Public Schools
Research Review Committee
APPLICANT IDENTIFICATION FORM (Appendix A: Rev April 2016)
 Please Submit only ONE copy of this Identification Form.

Application date: _____											
1. Title of research project:					RRC Number:						
_____ _____ _____					<table border="1" style="width: 100%; height: 30px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table> <p style="text-align: center; margin-top: 5px;">(MDCPS use only)</p>						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Title:</td> <td style="width: 15%;">Dr.</td> <td style="width: 15%;">Mr.</td> <td style="width: 15%;">Mrs.</td> <td style="width: 15%;">Ms.</td> <td style="width: 30%;">Other(Specify):</td> </tr> </table>						Title:	Dr.	Mr.	Mrs.	Ms.	Other(Specify):
Title:	Dr.	Mr.	Mrs.	Ms.	Other(Specify):						
2. Name of applicant (First name): _____ <div style="text-align: center;"> (Last name): _____ </div>											
3. Address: _____ _____ _____											
4. Telephones: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;">Cell: _____</td> <td style="width: 33%; padding: 5px;">Home: _____</td> <td style="width: 33%; padding: 5px;">Business: _____</td> </tr> </table>						Cell: _____	Home: _____	Business: _____			
Cell: _____	Home: _____	Business: _____									
5. E-mail address: _____											
6. Comments (if any) _____ _____											

Appendix B
(Rev April 2016)

Miami-Dade County Public Schools
RESEARCH REVIEW FORM
Research Review Committee

Instructions

1. Do not alter the length of this form.
2. Do not respond to an item in this form by referencing a section of the Prospectus.
3. Submit (2) Paper copies of this form and (2) Paper copies of the Prospectus (Summary).
4. **IMPORTANT CHANGE**

ALL applicants must submit ONE electronic **PDF file** containing ALL documents that are in the Paper copy (Including Appendix A, Appendix B, IRB letter, Consent forms, Prospectus, Data collection instruments, etc...)

The file must be named using the following naming convention: **RRC_9999_LastName_FirstName_YYYY**

- ✓ Last name and First Name of the Applicant
- ✓ YYYY the 4 digits of the year (e.g. 2017)

The PDF file should be emailed to **bfigueroa@dadeschools.net**

APPENDIX B

Miami-Dade County Public Schools
Research Review Committee
RESEARCH REVIEW FORM

Instructions: Do not alter the length of this form. Do not respond to an item in this form by referencing a section of the Prospectus. Submit **two hard** copies of your application and **Email a complete PDF copy of your application. The PDF file must be named: RRC_999_FirstName_LastName_yyyy.**

1. Title of research project:	RRC Number: <table border="1" data-bbox="1190 548 1442 621"><tr><td></td><td></td><td></td><td></td></tr></table> (MDCPS use only)						
2. Reason the project is being conducted (e.g., Dissertation, Grant, Research Project):							
3. Name of the university/agency with which the applicant is affiliated (if applicable):							
4. The Dissertation Chair OR The Grant/Project Director (PI) certifying that the Prospectus is acceptable and accurate: <table border="1" data-bbox="82 1163 1523 1289"><thead><tr><th data-bbox="82 1163 444 1205">Name</th><th data-bbox="444 1163 813 1205">Title</th><th data-bbox="813 1163 1523 1205">Signature</th></tr></thead><tbody><tr><td></td><td></td><td></td></tr></tbody></table>		Name	Title	Signature			
Name	Title	Signature					
5. Anticipated starting date: _____ 6. Anticipated completion date: _____							
7. What is the general purpose of the research?							
8. What are the primary questions to be addressed by the research?							

9. List the sources of data that are not dependent on the school/district records. Note that copies of all instruments must be included in the Prospectus.

10. List the sources of data that are dependent on school/district records. Be specific (e.g., academic grades, attendance).

11 a. Indicate the number of expected STUDENTS who will participate in the research.

Grade	PK	K	1	2	3	4	5	6	7	8	9	10	11	12	TOTAL
Students															

11 b. Indicate the number of Other Stakeholders who will participate in the research.

Teachers	
Principals	
Parents	
Others	
TOTAL	

12. Is the applicant currently an employee of Miami-Dade County Public Schools (MDCPS)? Yes No

13. What offices/school levels are targeted by the research?

- District office Elementary school Senior high school
 Region office Middle school Other (specify): _____

14 a. Will the applicant need to enter MDCPS school(s) to conduct the research? Yes No

14 b. Will the research be confined to the MDCPS school where the applicant is employed?

- Yes No Not applicable

15 a. Does the applicant intend to request data from the District? Yes No

15 b. Are you willing to pay for the RETRIEVAL of the data, if the data are not readily available? Yes No

18. What is the expected value (**Utility**) of the research to education in general?

19. What is the expected value (**Utility**) of the research to MDCPS in particular?

20. Is the applicant available to appear before the Research Review Committee? Yes No

21. Is the applicant willing to submit a full copy of the research report, dissertation or thesis? Yes No

22. Anticipated date for submitting an abstract of the research findings to the RRC: _____

23. Beginning with the Prospectus, list the titles of all enclosed documents (e.g., IRB Approval, Support Letters, Data Collection Instruments, Parent Permission Form, Student Assent Form, etc...).

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	

Appendix C
SAMPLE INFORMED CONSENT FORM

Dear Applicant: As you consider conducting research involving MDCPS students; please know that it is the responsibility of the RRC to protect MDCPS students from any possible harm (physical, psychological, or any other type). To that end, you are required to have signed parent consent for every student under 18 years of age and who will be included in the study. At a minimum the parent consent **MUST** be written in a simple and clear format in a language that is easily understood by the parent. **Since MDCPS parents speak several languages, you may consider translating your consent form (if applicable).** This sample is provided as a guideline only. You do not have to use this form, but your version of the parent consent form must contain at least the following elements:

1. Title of research project/study:

2. Description of the Study:

The goal of this study is to learn (explain the purpose of the study). You are being asked to take part in this study because (state why the child was selected). Please read this form and ask any questions you may have before you agree to participate in this study. If you decide to be part of this study you will (describe in simple language ALL procedures, their purposes, the amount of time needed of the participant. If there is a plan to photograph, audio or video tape the research activity please state that in this section).

3. Risks and Benefits of Being in the Study:

3.1 Describe any reasonable foreseeable risks, discomforts, inconveniences, and how these will be managed. You may say: {This study does not have anything – to the best of my knowledge- that may hurt you or make you feel bad. If you do feel bad in any way you can stop being part of the study at anytime. Nothing bad will happen to you if you stop being in the study.}

3.2 Describe any benefits reasonably to be expected. If benefits are not mentioned, the following sentence may be added: {We do not expect that you will get any benefit from participating in this study.}

4. Confidentiality and Anonymity :

Describe the extent to which confidentiality of records identifying the participant will be maintained. Describe how sensitive and private participant data will be stored and managed to assure confidentiality.

Confidentiality means the researcher will have access to information that can identify the participant (e.g., Name, SSN, etc.).

Anonymity means the researcher will collect NO identifying information from participants. (If subjects can be assured of anonymity, then this must be stated in the Informed Consent Form.) You may want to consider statements, such as:

- *Any information obtained about you from this study including answers to questionnaires, performance on a test, etc ... will be kept strictly confidential.*
- *We will protect your confidentiality by coding your information with a number so no one can link you with your answers, by disposing of paper records, and by storing data in secure areas.*

5. Voluntary Nature of the Study:

Your decision to participate in the study is voluntary. You are free to choose not to participate in the study without any penalty. If you decide to stop participating in the study the information gathered will (state what will happen to the data already collected from the participant who decide to withdrew from the study? will it be used or destroyed?)

6. Contacts and Questions:

If you have questions ask us. If you have questions later, you can call the researcher or Faculty Sponsor (if student research project). Include day phone numbers and addresses for all listed individuals. If you have questions or concerns about your rights as a research subject, please contact the IRB contact at or , RRC contact at or via emails at contactname@emailaddress.edu

7. Agreement (Statement of Assent):

I have read the procedure described above. I voluntarily agree (or allow my child) to participate in the research study and I have received a copy of this description. [If research participants do not receive a copy of their informed consent form, they should then receive an informational sheet including at least the title of your study, along with the your name and contact information, along with the contact information for the IRB.]

Participant's Name: _____ Signature: _____ Date: _____

Parent's Name : _____ Signature: _____ Date: _____

Researcher's Name: _____ Signature: _____ Date: _____

Appendix D
(Rev-Apr-2016)
Miami-Dade County Public Schools
Research Review Committee
APPLICATION FOR SECURITY CLEARANCE
Instructions

5. Before conducting any research in M-DCPS, a researcher who is not a current M-DCPS employee must obtain a security clearance from the M-DCPS Fingerprint Office.
6. If you are not a current M-DCPS employee, please fill out the form in Appendix D and submit it with your application.
7. Your application for security clearance will be signed by the Research Review Chairperson and returned to you. You need to make an appointment to get your application signed. Please call 305 995 7091.
8. Submit the signed application to M-DCPS Fingerprinting Office for processing.
9. The background check takes few days and its cost is borne by the applicant. Once cleared, the applicant is issued a clearance letter that he/she must submit to the Research Review Chairperson to get the approval to conduct research in M-DCPS.

Miami-Dade County Public Schools

APPLICATION FOR SECURITY CLEARANCE (Rev-Apr-2016)

Section A: Carefully Complete this Application for Security Clearance

Last name: -----		First Name: -----		Middle: -----	
Home Address: -----		City: -----		State:-----	Zip: -----
Telephone – Cell -----		Office: -----		Home: -----	
Social Security No.: -----		Date of Birth: -----		Place of Birth: -----	
Ethnicity (White, Black, Hispanic, Asian, Other(Specify): -----				Gender (Male, Female): -----	
Have you ever been arrested? : Yes - No -		Have you ever entered a plea of Guilty or “Do not contest”? : Yes - No -			
Have you ever been placed in a pre-trial intervention program, probation, or fined in a criminal proceeding?: Yes - No -					
Have you ever received an adjudication of guilty, had adjudication withheld, had a criminal case result of “no prosecution”, or had a criminal record sealed?: Yes - No -					
NOTE: If you answered “yes” to any of these questions, you may be asked to provide a written explanation and a copy of court disposition certified by the Clerk of the Courts.					

Section B: Research Project Identification Information

RRC No: -----	Institution /University: -----				
Research Project Title: -----					
Principal Investigator First Name: -----			Last Name: -----		
RRC Approval Date: -----			RRC Expiration Date: -----		

Section C: Signature to be completed by the Assessment, Research, and Data Analysis (RRC)

I request that the person identified in Section A, who may be involved in the Research Project identified in Section B, be fingerprinted and checked for Level 2 security Clearance from the FLDOE and the FBI.

Dr. Tarek Chebbi, Chairperson; Research Review Committee: -----

APPLICATION PROCEDURE FOR SECURITY CLEARANCE

- Before undertaking an RRC-approved study in a school, a researcher who is not a current MDCPS employee must obtain a security clearance.
- A separate application form must be used for each affiliated researcher who intends to enter a school. The original form with Section B completed by the RRC Chairperson and Section A blank may be duplicated to produce individual forms for each researcher.
- The security check is based on the researcher's fingerprints. The prints are processed digitally, so no ink is involved.
- Appointment: Call the M-DCPS Fingerprint Office at **305-995-7472** to schedule the fingerprinting.
- Address: The office is located at: **1450 NE 2nd Avenue, Room 150 , Miami, FL 33132**
- Required Documents: Bring with you the following documents: (a) this form with Sections A and B completed; (b) your driver's license; and (c) your social security card. Do not forget these documents; your application cannot be processed without them.
- Fee: The fee is approximately **\$83.50 (as of April 2016)**. The method of payment is by money order payable to School Board Miami-Dade Fingerprinting. When you schedule your appointment, ***inquire about the exact amount of the fee and the current procedure for payment.***
- Time Required: The security check is usually completed in about three days, unless it yields issues that need to be addressed.
- Notification: The researcher will be notified of the results of the security check by the RRC Chairperson. A researcher who is cleared by the check will be issued a letter to that effect.
- Expiration: A researcher's security clearance is valid for the life of the RRC approval on the designated study. The researcher, however, is obligated to inform the RRC Chairperson of any arrest that occurs after the security check.