Final: 9/20/05

LOS RIOS COMMUNITY COLLEGE DISTRICT REQUEST TO CONDUCT RESEARCH ABOUT LRCCD STUDENTS AND/OR COLLEGES

Research Proposal Cover Sheet

(Please	e type directly onto this form, save to your computer and e-mail to	the appropriate office.) Date submitted:
Principal Investigator:		Title:
Title of	of Project:	
Home Address:		Home Phone:
Email A	Address:	
LRCCD Employees: College:		Work Phone:
Externa	nal Lead Researcher: College/University/Organization:	
	Address:	Phone:
	Program of Study:	Faculty advisor:
Individ	dual/Group Responsible for Study Oversight Approval (if appro	opriate):
_	pal Investigator's Faculty Advisor <u>OR</u> Department Chair <u>OR</u> F	
		Signature:
Title:		Date:
Names/	s/titles of additional investigators:	
History	ry of this proposed study: Modification Renewal If it is a Modification or Renewal, does this submission diff	er in any way from the previously approved proposal?
Attach	ch the Following:	
	A research proposal abstract that defines your study: summary of the study, including its purpose and background; methods section; subjects required (number, source/recruitment procedures, criteria for inclusions/exclusions, etc.); name(s, academic background and experience of investigators; detailed description of data to be extracted from student records (where appropriate); copy of survey instrument (where appropriate); copy of interview protocol (where appropriate).	
	Copy of university/agency research approval, including approved guidelines for human subjects in the research (where appropriate)	
	Consent form for participants (if consent from participants is needed to conduct the research)	
	Draft survey instrument and/or interview protocol	
	Research Offi	ce Approval

Approved ____ Not Approved ____ Signature ______ Date ____