

RESEARCH PROJECT ACTION FORM

Request Number

<p><u>Director/Topic Area</u></p> <p>Title of reviewer: _____</p> <p>Signature of reviewer: _____</p> <p>by _____</p>	<p>In review of this research project, and in consideration of any guidelines of this office, the proposed project is considered:</p> <p style="text-align: right;"><input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable</p> <p style="text-align: center;">Return</p>
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<p><u>Area Superintendent</u></p> <p>Signature: _____</p> <p>by _____</p>	<p>In review of this research project, and in consideration of the school personnel and students within this Area, the proposed project is considered:</p> <p style="text-align: right;"><input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable</p> <p style="text-align: center;">Return</p>
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<p><u>Evaluation Specialist</u></p> <p>Signature: _____</p>	<p>In review of this research project, and in consideration of the research design and plan for data analysis, the proposed project is considered:</p> <p style="text-align: right;"><input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable</p>
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<p>Principal(s)</p> <p>Signature: _____</p> <p>* One form required for each principal</p>	<p>My signature suggests that I have reviewed this research project and agree that our school will participate, subject to the researcher's compliance with District policies.</p>
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If considered "unacceptable", or you have suggestions for improvement/modification, please complete the explanatory comment page. Send completed forms (by return date) to: **Laura Verry-Sidoran, Office of Accountability, Testing and Evaluation.**

Office use only	<p>ACTION:</p> <p style="text-align: center;"> <input type="checkbox"/> Accepted as proposed <input type="checkbox"/> Unacceptable <input type="checkbox"/> Accepted with modifications <input type="checkbox"/> Other action taken <input type="checkbox"/> Accepted per directive </p>		
Comments:			

