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DEPUTY SUPERINTENDENT'S OFFICE
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RESEARCH ENDORSEMENT FOR NON-DISTRICT PERSONNEL

SECTION 1:

To be completed by the person who is requesting approval to conduct research in Edgewood Independent School District.

I, [print name] _____ do hereby agree that I will abide by the Policies, Rules and Regulations and the Administrative Procedures of the Edgewood Independent School District and will furnish a copy of the report describing the findings of the study to the Academic Team and the Deputy Superintendent of the Edgewood Independent School District.

Signature of the Requestor

Date

SECTION 2:

To be completed by the requestor's profession, the chairperson of an advisory committee, or other professional person sponsoring the research.

I am familiar with the proposed study and judge that the researcher submitting this proposal is professionally qualified to undertake this investigation. Further, the research design is valid and appropriate.

Signature of Sponsoring Professional

Date

Position or Title of Sponsoring Professional

Name of Department and Institution or Organization