



219 North Main Street, Suite 402
Barre, VT 05641 (p) 802-479-1030 | (f) 802-479-1835

Research Request Application

General Guidance

The Vermont Agency of Education (AOE) has developed a process whereby external requestors of confidential data may ask for access to extant data to conduct research projects or evaluations germane to public education. Entities seeking access to confidential or personally identifiable AOE data must first meet the overarching requirements of: **1) conducting research and or evaluation, and 2) the project must have legitimate educational interest.**

Request Process

All individuals or organizations requesting access to such data must complete this “Research Request Application” and submit it to the Vermont Agency of Education for review. Please complete each section of the application fully. Completed requests will be reviewed in the order they are received.

If the project is approved and the data requested are available, a contractual agreement will be developed and must be signed prior to the release of any potentially identifiable data.

In the event a request is rejected, specific reasons shall be given and, if appropriate, may include information concerning possible remediation. Requests may be rejected if information on the application form is incomplete.

Please submit any questions you might have about this process to the [AOE Information Officer](#).

Please submit your completed application to the [AOE Information Officer](#).

Research Request Application

Section I. Contact Information

Name of Requestor:	
Title of Requestor:	
Organization (If	
Phone Number:	
Email Address:	
Address:	
City:	
State:	
Zip Code:	
Today's Date:	

Are you requesting Personally Identifiable Information (PII) or sensitive information (e.g. student-level data like Free and Reduced-Priced Lunch or Individual Educational Plans status)?
_____ (yes / no)

exception that your work would fall under. If you are unsure which exception is appropriate, please see the [FERPA](#) exceptions.

FERPA Studies Exception for PII:

1. Develop, validate, or administer predictive tests _____
2. Administer student aid programs _____
3. Improve instruction _____

or

FERPA Audit or Evaluation Exception for PII:

1. Audit or evaluate a Federal or State supported education program _____
2. Enforcing or complying with Federal legal requirements that relate to a program _____

FERPA Authorized Representative for PII requests:

Please designate an "authorized representative" for this project:

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Section II. Project Information

1. What is the title of your project?

2. Please provide a brief overview/scope and objectives of your project (e.g. an abstract.) Please summarize objectives succinctly. If you have hypotheses you will be testing, please list them here:

3. Data Loan Period – Estimate data loan period for using the data set and when it will be destroyed.

Project Start Date:	
Project End Date:	

Additional Information regarding data loan period:

4. If your project is externally funded (e.g. foundation, government contract, or grant), please indicate the source(s) and amount(s) of the funding.

Section III. Benefits of the Project

1. What potential benefits will this project have for the Vermont Agency of Education, our local school systems, educators, policy makers, or researchers?

2. What are the anticipated benefits of the proposed project to the project participants?

Section IV. Design

1. Please list your project /research/evaluation questions below:

1	
2	
3	
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2. In the space below, please describe the design of the proposed project and the methodology that will be used to address each of the aforementioned project / research / evaluation questions. Use enough detail to ensure the Vermont Agency of Education can assess **the extent to which your proposed project will meet the objectives you have provided in Section II of this application**. Describe the population to be studied, data collection, analysis, interpretation procedures to be used, and information that will be disclosed. Use as much space as necessary. You may also include attachments if relevant.

Section VI. Proposed Data Collection Instruments/Protocols

1. If you intend to deploy additional data collection instruments/protocols (e.g. surveys, etc.) as part of your project, please list them below including the sample from whom you intend to collect this information. Draft versions of these data collection instruments, if available, should be attached to this application.

Proposed Data Collection Instruments/Protocols

	Instrument/Protocol	Audience	Notes
1			
2			
3			
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Section VII. Human Subjects Protection

1. How will Institutional Review Board (IRB) approval be addressed in the proposed project? If your project has already been approved by an IRB, or if an IRB has designated your project to be "exempt," please provide evidence of the IRB's review and or decision. If you do not plan to conduct an IRB review, please indicate why this project does not meet the definition of "human subject research."

2. Please list the names and titles of the people who will have access to the data you are requesting:

Name:	Job Title:

3. Please describe the training that the requestor, authorized representative, and any party who will have access to the data have received regarding the protection of human subjects/data security and confidentiality.

Section VIII. Data Stewardship, Security, and Destruction Information

1. Please describe your organization's data stewardship and security policy and the procedures that provide internal controls to protect the VT AOE data you are requesting. Please be specific about the processes and procedures used to **manage data collections, processing, storage, use, and destruction**. Please be specific about requirements related to **encryption, where (e.g. environment/platform) the data will be hosted, transmission methodologies, and provisions to prevent unauthorized access**. Please use attachments if necessary to provide full documentation for this section.

2. Please list the name and job title of the person(s) who will be designated to oversee the privacy and security of the data you are requesting:

Name:	Job Title:

Section IX. Work Products

For each anticipated work product, please provide the following information:

Work Product (e.g. Year1, Final Report, PowerPoint slides for conference presentation, etc.)	Audience	Anticipated Completion Date	Dissemination Plans

Section X. Signature(s) of Applicant(s)

Name of Requestor, (**printed**)

Title

Signature

Date

Institution

E-mail and Phone Number (area code and extension)