APPENDIX II
APPLICATION FOR DOING A RESEARCH INVESTIGATION

Name_________________________________________ Date_______________________
Affiliation_________________________ Phone_________________ E-Mail ________________

1. This Investigation is for:
   Course Requirement* ____, Graduate Requirement_____ Professional Interest_____
   *If a Course Requirement: Name of Instructor: ________________ Email:______________

2. Brief Description of Study:

3. Has a Human Subjects Committee approved your protocol or investigation? Yes  No
   If yes please attach a copy of the approval document.
   If not, have you applied for approval? Yes  No
   (Studies requiring interviews require approval by an ethic committee assigned this
   responsibility at a university or research institute.)

4. Requested dates for collecting data at Lemberg _______________________

5. What will your study require of participants? (e.g., Observation, individual or group
   testing, questionnaires to parents)

6. Will your subjects be children __ teachers ___ and/or parents ___

7. Amount of time required per subject_____

8. Number of subjects needed_____

9. What are the required characteristics of subjects (e.g., ages, gender, home language, race,
   income)

10. Will the study require voice or personal image recording? Yes  No

11. Is there any funding provided for the study to provide an honorarium? Yes  No
    If Yes, Source ________  Amt. for subject payment________________

12. Do you agree to send us a copy of your completed study and publication that include
    data received from the Lemberg community? Yes  No

Approved ____________________________- Executive Director  Date _____________

____________________________________- Research Review Representative