

**Lancaster Independent School District
Office of Research and Evaluation
Form H - Statement of Support for Research**



I. Research Background (to be completed by researcher)

MAIN PROJECT CONTACT INFORMATION		Project ID:
First Name:	Last Name:	
Position:	Organization	

Project Title:

II. Description of Research Proposal

Researcher is to provide the sponsor with a copy of the Application / Executive Summary and the Time Requirement Forms.

III. Agreement (to be completed by the sponsor)

I, _____ (name), _____ (title) of
_____ (Department), support the proposed study, with the understanding that

- the privacy and confidentiality of any staff or student will be protected,
- I have the right to terminate the research study at any time,
- I have the right to review all consent forms and research documents at any time during the study,
- findings from this study will be distributed to me.

I have reviewed the Executive Summary and the Time Requirement Form, if applicable, of the above named research.

I find the above named research valuable; its findings will be used to inform the work of my department/team.

I understand that data should be released only by the departments that maintain them. My staff and I shall not release data to the researcher without approval from the Lancaster ISD Research Review Board.

Signature of Lancaster ISD Sponsor

Date