



UNITED INDEPENDENT SCHOOL DISTRICT

SURVEY/RESEARCH AGREEMENT INFORMATION

Date: _____

Name: _____

Address City State Zip Code

Telephone Cellular Fax E-mail

(Space limited to 180 words)

1. Nature of Survey/Research:

2. Who will be surveyed?

3. Proposal Abstract:

4. Major hypothesis or question to be tested:

5. Describe the school district population and the date to be collected, (number of professionals, students, schools, etc. in the sample, data sources needed).

Attach copies of forms, questionnaires, tests, and/or other instruments, which you plan to use in collecting the data.

6. Describe your plan for conducting the study including administration for instruments, other data collection activities, and the timetable you will follow:

7. Describe the statistical or other analysis techniques to be used in the treatment of your data.