

*MEDICINE HAT PUBLIC BOARD OF EDUCATION OPERATES AS MEDICINE HAT PUBLIC SCHOOL DIVISION,
AND FOR THE PURPOSE OF THIS DOCUMENT WILL BE REFERRED TO AS "MHPSD" AND/OR "DIVISION"*

SECTION 900 – School and Community Relations

**ADMINISTRATIVE PROCEDURE - EXHIBIT: RESEARCH APPLICATION
AND APPROVAL**

<i>EXHIBIT CODE:</i>	<i>904 E 003</i>
Policy Reference: 904 – Partnerships	Procedure Code Reference: 904 AP 003 – Conducting Research Studies Within MHPSD

EXHIBIT

Review Guidelines & General Submission Information for all Researchers:

MHPSD values lifelong learning and evidence-based practices. As such, the Division recognizes the importance of schools supporting research and evaluation projects. MHPSD takes a range of considerations into account when reviewing submissions, including the following key criteria:

- The educational benefit, relevance, and value to Medicine Hat Public Schools, including how the research evaluation may inform or support the Division’s priorities and goals in accordance with the MHPSD Education Plan.
- The potential impact on regular school and classroom activities, as well as the demands on staff and/or students during and outside of regular school hours.
- The intended study participants, including the number, age, and grade of students, the number of teachers, Division leaders, or other Division employees, the parents or legal guardians of students, and potential school sites as applicable. Be advised that proposals for research in schools with first year principals will be evaluated on a case-by-case basis, with consideration for the transition, capacity, and time demands for first year principals.
- The anticipated timeline, start date, and completion date of the research project.
- Appropriate, feasible, and valid data collection tools and protocols, for example, surveys, questionnaires, details of evaluative measurements, interview protocols and questions, and when available, references to validation studies.

- Secure and appropriate usage and storage of data, including procedures and timeframes for secure use, retention/storage, disclosure, and disposal. Data containing personal information must be stored, used, and destroyed in alignment with Alberta’s Protection of Privacy Act, so as to maintain confidentiality of the information.
- Agreement by the researcher to submit a final report detailing the findings of the research to MHPSD upon the conclusion of the research project.
- Clear procedures for obtaining **active** informed consent from participants. Active informed consent is required for all research participants who are members of the MHPSD community. The process for obtaining active informed consent must include procedures for participants who wish to withdraw at any time during the study
 - Passive/opt-out/negative consent processes will not be approved.
 - Written parental or legal guardian consent is required for any research that requires participation of students under the age of 18; a written assent form for participants under 18 must be included.
 - Information sharing, participant recruitment, and obtaining of consent should be conducted through methods that ensure **minimal impact** to the workload of school staff.

Approved: March 2, 2026



Application to Conduct Research

We appreciate your interest in conducting research with Medicine Hat Public School Division (MHPSD). The approval process will proceed most efficiently if you ensure the documents you submit are complete, error free and your research aligns with Administrative Procedure 904 003 and review criteria. Below you will find a checklist to guide your submission.

1. Required Documents Checklist

Note: Should there be inconsistencies between this checklist and the documents shared with the Associate Superintendent: Learning and Student Supports, this application will be declined until further notice.

All boxes must be checked for the proposal to be considered for review. Failure to do so will result in your application being returned with delayed approval or denied.

- This proposal **has received** ethics approval that meets Canadian standards (TCPS 2) for social and behavioural research with human participants and a **full copy** of the Research Ethics Board (REB) application and approval are attached.
- Letter of Introduction to Research to all that apply; principal, potential staff participants, parent/legal guardians, independent students on institution letterhead.
 - Other recruitment details are attached i.e. Oral Explanation, Posters, etc.
- Informed Consent documents are attached (use the naming convention Staff Consent, Parent/Guardian Consent or Student Assent for these documents).
 - Staff Parent/Guardian Student Assent
- Copy of surveys, questionnaires, observation protocols, interview questions or interview guide are attached.
- Copies of Police Information Check (PIC) including Vulnerable Sector Search for all team members (those accessing student information, working with students or staff). Checks are accepted within 1 year of issue. **Employees of MHPSD conducting research need not submit a check as one will already be on their personnel file.**

2. Expectations Checklist

- I have thoroughly read the MHPSD Policy re: Conducting Research Studies within MHPSD, as well as the General Submission Information for all Researchers listed above, and this proposal meets all of the requirements.
- Alignment with the MHPSD Education Plan and/or K-12 Curriculum and Programs of Study is clear.
- Research does not impose on student instructional time or teacher duties (i.e. professional learning time).
- All potentially identifiable data must be stored in Canada.



- The surveys, questionnaires, interview questions or interview guide only ask respondents to comment on their *own* perceptions, opinions, and observations.
- No references to the jurisdictional name (Medicine Hat Public School Division) or acronym (MHPSD) in any report writing, course work, paper or publications will be included as part of this research project.
- No MHPSD school names or identified school acronyms will be included or referenced in any report writing, course work, paper, or publications.
- Provisions of the Alberta's Protection of Privacy Act and any of the Medicine Hat Public School Division's policies, procedures and guidelines relating to the confidentiality of personal information that was obtained, generated, collected or provided in records requested for this study have been complied by the researcher.
- All persons who will have access to personal information or data in this proposed study have agreed in writing to the same conditions in the legal agreement as the researchers and this written agreement has been obtained by the researcher.

Note: Should information be requested from MHPSD by the researcher, a fee may be charged, and an estimate of this fee would be provided in advance.

3. Identifying Information

Date:

(YYYY/MM/DD)

Name of Principal Researcher(s):

(Last, First)

Position of Principal Researcher:

Supervisor Name (if student): N/A

Affiliated Institution / Organization:

Mailing Address of Institution (with Postal Code):



Phone:

Email:

4. Research Study

Title:

Approximate time period for data collection:

(Important: it may take up to 8 weeks to process this application, with extension for required revisions)

Preferred start date:

Estimated completion date:

(YYYY/MM/DD)

(YYYY/MM/DD)

Select the type of proposal for research from the list below (check all that apply):

- Doctoral Dissertation
- Institutional Project - Funded
- Master's Thesis
- Institutional Project - Unfunded
- Graduate Research Project
- Other (please specify): [Click or tap here to enter text.](#)

5. Medicine Hat Public School Division (MHPSD) Affiliation

MHPSD Employee:

- No** or **Yes.** If yes, specify location:

Other association with the MHPSD (please describe):



Name(s) of School(s)/Service Unit:

6. Brief Summary of the Project

Provide a very succinct summary of the research questions and goals of the proposal. Please seek to do so in under 300 words and using language a non-specialist will understand.

The spaces provided for your responses will expand as you write or paste.

Research Questions

Research Goals

7. Research Methodology

Describe the methods and procedures with particular emphasis on the perspective and experience of research participants and any others potentially affected by the research. Provide as much detail as necessary to enable consideration of risks to participants.

Important: cutting and pasting method descriptions from grant proposals, thesis proposals, etc. is normally not sufficient to properly complete the next section. Describe the researcher's role in relation to the study participants and consider how that relationship may affect your methodology.



8. List of Study Participants

Describe who will be the potential participants in this study. Any changes to this list after the application is submitted will require approval. Requests are directed to Director of Learning & Partnerships indicating in the subject title “changes to application”.

Number of students and grade level(s):

Number of teacher:

Number of school or system-based administrators:

Number of other MHPSD employees:

Number of parents/guardians of students:

9. Recruitment of Participants

Describe your method(s) for recruiting participants and specify who will do the recruiting (refer to Application Procedures & Regulations in MHPSD Policy re: Conducting Research Studies within MHPSD). Describe how and where you will advertise your project. Describe any provisions that have been made to accommodate the participants’ language.

- Include a copy of the recruitment notice, advertisement, and information sheet (as well as that used by a sponsor or supportive organization if applicable).
- If actively seeking participation by speaking to specific groups, include this below or attach the text that will be used for oral presentations.

Important: Once MHPSD research approval is obtained, please include the notification of approval in your recruitment package so principals can make an informed decision about their participation in the research.



10. Informed Consent/Assent

A request for informed consent is required for all human participants who are members of the MHPSD community. Describe the process for obtaining informed consent/assent as well as how you will create understanding about the right to withdraw.

Describe when and how participants will be informed of the right to withdraw from the study. Describe the procedures that will be followed for participants who wish to withdraw at any point during the study and what happens to the information contributed to this point. Include a copy of the completed request for informed consent and, where participants are under the age of 18, a copy of process for assent with this application.

Important: Where it is appropriate and the risk to participants is minimal, MHPSD will consider the use of electronic consent.

11. Description of Data, Data Gathering and Analysis

Describe, in as much detail as possible, all data to be gathered for this project. If personal information will be gathered or access is being requested, please describe this in detail where prompted, and its relevance to the research question. Access will be given only to the records listed in this application and only for the purposes approved for the research project described above. Any changes to this list after the application is submitted require approval and requests should be made in writing to the Associate Superintendent: Learning and Student Supports.

i. Describe, in as much detail as possible, the data that will be gathered, and if relevant, the personal information required from existing records or the personal information that will be collected directly from research participants (e.g., age, gender/sex, etc.).



- i.
- ii. Describe in detail how the data will be used and to whom it will be disclosed (include any research colleagues or assistants who will have access to the data).

- iii. Describe security measures, procedures and controls you will have in place to ensure the security and confidentiality of the data (include computer security measures and controls to prevent unauthorized access or disclosure).

- iv. State the expected timeframe during which access to any records may be required and the expected period of time during which these records will be used.

- v. Describe the procedures and the expected timeframe required for removal and destruction of individual identifiers.

Printed Name of Researcher

Signature of Researcher

Date (YYYY/MM/DD)

Printed Name of Witness

Signature of Witness

Date (YYYY/MM/DD)



12. Potential Benefits

Outline the potential benefits of this study for MHPSD students, the researcher, participants (if other than students), the research community and society at large. Outline how this study aligns with MHPSD's Education Plan and/or K-12 Curriculum and Programs of Study.

13. Dissemination of Research

Feedback to the Medicine Hat Public School Division:

At the conclusion of this study, the researchers are asked to complete a summary of findings and feedback to be submitted electronically to the Associate Superintendent: Learning and Student Supports. Researchers are invited to send a pdf of the full report as well. Your contact information will be provided in case anyone would be interested in further information about your study.

Anticipated date of submission is:

Proposed Workshops and Publications

Outline potential workshops or publications that may arise from this research below.

14. Authorization

Personal information contained on this form is collected under the Alberta's Protection of Privacy Act and will be used to evaluate and administer the application to conduct a research project. If you have any questions about the collection of your personal information, please contact the Associate Superintendent: Learning and Student Supports.

I agree that this research will be conducted according to the policies outlined by the Medicine Hat Public School Division. I agree that Medicine Hat Public School Division, its schools, staff, or students will NOT be identified in any report, publication, or presentation.

If this study is part of the requirement for completion of a degree, your academic supervisor must review it. We strongly encourage researchers to also have this application peer reviewed prior to submission.



I have reviewed this research application, support the proposed study, and have confirmed all criteria and expectations outlined on pages 1 and 2 of this application have been met or addressed.

Printed Name of Academic Supervisor

Printed Title of Academic Supervisor

Signature of Academic Supervisor

 Date (YYYY/MM/DD)

Medicine Hat Public School Division use only: MHPSD Authority Supervisor			
The application for access to records pursuant to the <i>Alberta's Protection of Privacy Act</i> is approved subject to the terms and conditions of corresponding legal agreements.			
Supervisor Name	Title	Signature	Date (YYYY/MM/DD)

Application package and review guidelines adapted from the Calgary Board of Education *Application to Conduct Research* and *Edmonton Public Schools Research Proposal Submission Information and Requirements (2023)*

