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Proposals Add Proposal

Preview as Adding a record Choose a Proposal to preview

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Instructions

Please review the following checklist of research proposal materials before beginning the online research proposal submission form. The following research proposal submission. Please complete the following sections in a Microsoft Word document, save, and then begin the online submission form proposal on our website: <https://www.lausd.org/Page/18641>

Each field has a character limit of 2500 characters. You can use the character count tool in Microsoft Word to count all characters.

Once completed with the entire form, click the "SAVE" button to submit. NOTE: The "SAVE" button will not save your proposal. **You will not be able required fields are filled. Once you exit the form, all information entered is lost. You are unable to save information to edit at a later time.** We recommend into fields to ensure all information is saved.

You will receive a confirmation email once your proposal is submitted with a proposal identification number. You will need to refer to this number if r

Please contact the CERR team with questions. Phone: (213) 241-4100, E-mail: orpe@lausd.net

Submission Date

Submission Date 04-16-2026

Proposal Submission Window *

Project Lead

Project Lead First Name *

Project Lead Last Name *

Project Lead Role *

Project Lead Organization Name *

Project Lead University Department (if applicable)

Project Lead E-mail Address *

Project Lead Phone Number *

Is the Project Lead an LAUSD Employee *

Second Researcher (if applicable)

Second Researcher First Name

Second Researcher Last Name

Second Researcher Role

Second Researcher Organization Name

Second Researcher University Department (if applicable)

Second Researcher Email

Second Researcher Phone Number

Is the Second Researcher an LAUSD employee?

Third Researcher (if applicable)

Third Researcher First Name

Third Researcher Last Name

Third Researcher Role

Third Researcher Organization Name

Third Researcher University Department (if applicable)

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Third Researcher Email

Third Researcher Phone Number

Is the Third Researcher an LAUSD Employee?

Proposal

Proposal Title *

- Proposal Type *
- Standard Research/Evaluation Study
 - Action Research - Study conducted by practitioners to improve practices in their own school/classroom setting. Typically conducted in a classroom setting.
 - Program Monitoring - Data collection intended solely for internal use for program improvement and not for public reporting
 - Other

Is this study part of a graduate student thesis or dissertation? *

Will research be conducted in any researcher's own classroom, own school, or own district office? *

Study start date *

Study end date *

- Which department in LAUSD is going to benefit the most from this research? *
- Division of Data, Strategy, and Innovation
 - Division of Instruction
 - Division of School Operations
 - Eco-Sustainability Office
 - Educational Transformation Office
 - Facilities
 - Human Resources
 - Medical Services Division
 - Personnel Commission
 - Special Education, Equity, and Specialized Programs
 - Student, Family, and Community Engagement
 - Supplemental Education Services
 - Transitional Programs
 - Other

LAUSD Point of Contact (if applicable)

Each following section has a 2500 character limit (letters, symbols, and spaces). Please refer to the yellow "i" information icon to the left of each field for a description of necessary content.

Abstract *

Statement of Purpose *

Literature Review / Theoretical Framework *

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Research Question(s)/Hypothesis *

Methods: Design *

Methods: Sampling and Recruitment *

Methods: Measures *

Methods: Data Collection Procedures and Burden to the District *

Type of Data Collection *

Select up to 20 choices

Is any part of your data collection going to be audio/video recorded? *

Yes

No




Will you need non-public data files from LAUSD? *

▼



Please describe the data elements (variables) you will need from LAUSD

Methods: Analysis Plan *

Human Subjects Protections *

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Benefit to the District *

Researcher Qualifications *

Organization(s) Funding the Proposed Study *

Upload Appendices, One-pager for Program Staff, IRB, and CERR Statement of Agreement

Please upload appendices

No file chosen

Please upload one-pager for program staff

No file chosen

Please upload proof of IRB approval or exemption determination

No file chosen

Please upload CERR Statement of Agreement *

No file chosen

Click the green Save button on the top right corner to save and submit your proposal.