**Medical Education Research:**

**Request Form for NYITCOM Institutional Research Data/NYITCOM Student Records**

Please address all items below and email the completed form to Kelly Ryan at [kryan05@nyit.edu](mailto:kryan05@nyit.edu), for distribution to NYITCOM’s Education Research Data Committee (ERDC). Please note that the data request form, along with final ERDC notification of approval of the request, must be attached to your Institutional Review Board (IRB) protocol as part of your submission to the IRB. ***Please note the following:***

-You **must** include a copy of any proposed surveys and recruitment emails or messages

-Unless exempted by the NYITCOM Dean, if you work outside of NYITCOM, you **must** have an NYITCOM faculty member act as your sponsor so that they may coordinate in assisting with your data collection.

Title of Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name/Job Title of Principal Investigator:

2. Name(s)/Job Title(s)/Role(s) of Member(s) of the Study Team:

3. Research/Evaluation Objective:

4. What does the literature say about the proposed study topic?

5. How will this study contribute to the body of knowledge? That is, what knowledge gaps will it fill?

6. What is the proposed study design and methodology?

7. What are the start and end dates for the study?

8. What institutional data or student records are you requesting? (Please be specific about what data you need, and indicate if individual-level identifiers are required):

9. Time period(s) for which data are being requested (please include detail about the reporting period(s) and/or cohorts, if applicable):

10. Who will have access to the data?

11. How will data be stored and protected while the study is in progress?

12. Please describe plans and dates for data destruction after the study has concluded.

13. How, and where, will study results be disseminated?