



**IV. BACKGROUND INFORMATION**

Please list your qualifications to conduct the proposed research (e.g., previous research projects, academic background), or other related information that documents your qualifications. Attach curriculum vitae if available.  
*(This may be typed on a separate piece of paper, but should not be handwritten.)*

**V. BACKGROUND VERIFICATION**

Please provide three references who can verify your credentials.

NAME/TITLE	PHONE	E-MAIL
1.		
2.		
3.		

Would you be willing to allow the Department to conduct a security check on your background?

Yes       No

**VI. RESEARCH PROPOSAL (you may address these points on separate sheets of paper)**

- A. Research Overview: Please identify the specific topic, issue or problem under study, why it is important and describe the overall research approach. Please discuss: 1) the purpose of the research, 2) the specific research questions and hypotheses, and 3) briefly review previous research and theory on the topic and how your study relates to previous work.**  
*(This may be typed on a separate sheet of paper, but should not be handwritten)*

### 2.1.2. Research Activitie

**B. Research Design:** First, please describe in detail how the study will be conducted. This review should include a discussion of: 1) research subjects (e.g. inmates, staff), 2) the specific research methods to be employed, such as surveys, interviews, observation, etc. Please pay particular attention to sample selection and instrumentation (provide a copy of any instruments to be used), and 3) a brief review of proposed methods of data analysis and reporting.

Second, please provide a breakdown, by source (researcher vs. Department) of the costs/resources required to successfully conduct the proposed project.

Third, please outline a projected research time frame as well as any other pertinent information necessary to adequately describe the project.

*(This may be typed on a separate sheet of paper, but should not be handwritten)*

C. **Expected Outcomes:** Please discuss the expected outcomes of your study, and how and by whom this research will be used. Additionally, please explain the anticipated benefits of the research to the Department of Corrections.  
*(This may be typed on a separate sheet of paper, but should not be handwritten)*

## POLICY COMPLIANCE AGREEMENT

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### **For the Researcher:**

I have reviewed the directive governing research activities in the Pennsylvania Department of Corrections (DOC) and agree to abide by the policies and procedures as outlined in this document in conducting the proposed research project and in distributing the research findings. I also agree to comply with the research conditions as cited by the Research Review Committee and will comply with all Commonwealth and departmental policies and procedures pertinent to conducting the proposed research.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### ***For the Research Advisor (Student Submissions ONLY):***

***I have reviewed the directive governing research activities in the Pennsylvania Department of Corrections (DOC). My signature below indicates that I have reviewed my student's research proposal and agree it meets all requirements as stated by the DOC and stands as a quality research proposal representative of this college/university.***

***Name:*** \_\_\_\_\_

***Signature:*** \_\_\_\_\_

***Date:*** \_\_\_\_\_

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### ***For Supervisor and Superintendent or Bureau Director (DOC Staff Submissions ONLY):***

***I have reviewed this proposal and approve this research study.***

***Name  
(supervisor):*** \_\_\_\_\_

***Signature:*** \_\_\_\_\_

***Date:*** \_\_\_\_\_

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***I have reviewed this proposal and approve this research study.***

***Name  
(Superintendent or  
Bureau Director):*** \_\_\_\_\_

***Signature:*** \_\_\_\_\_

***Date:*** \_\_\_\_\_

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