Republic of the Philippines
Department of Education
Caraga Administrative Region
Division of Surigao City
(NAME OF SCHOOL)
(School Address)

School
Logo

Title

Researcher, Position

Date and Year Completed

I. Introduction and Rationale

II. Literature Review

III. Research Questions

IV. Scope and Limitation

IV. Research Methodology

- a. Sampling
- b. Data Collection
- c. Ethical issues
- e. Plan for Data Analysis

V. Timetable/Gantt Chart
VI. Cost Estimates
VII. Plans for Dissemination and Advocacy
VIII. References

ANNEX 1: Research Proposal Application Form and Endorsement of Immediate Supervisor

A. RESEARCHINFORMATION

RESEARCH TITLE	
SHORT DESCRIPTION OF THE RESEARCH	
RESEARCH CATEGORY (check only one) o National o Region o Schools Division o District o School (check only one) o Action Research o Basic Research	RESEARCH AGENDA CATEGORY (check only one main research theme) o Teaching and Learning o Child Protection o Human Resource Development o Governance (check up to one cross-cutting theme, if applicable) o DRRM o Gender and Development o Inclusive Education o Others (please specify): _____
FUND SOURCE (e.g. BERF, SEF, others)*	AMOUNT
TOTAL AMOUNT	

**indicate also if proponent will use personal funds*

B. PROPONENT INFORMATION

LEAD PROPONENT/INDIVIDUAL PROPONENT

LAST NAME:	FIRST NAME:		MIDDLE NAME:
BIRTHDATE(MM/DD/YYYY)	SEX:	POSITION / DESIGNATION:	
REGION / DIVISION / SCHOOL (whichever is applicable)			
CONTACT NUMBER 1:	CONTACT NUMBER 2:		EMAIL ADDRESS:
EDUCATIONAL ATTAINMENT (DEGREE TITLE)	TITLE OF THESIS/RELATED RESEARCH PROJECT		

SIGNATURE OF PROPONENT:

Proponent 2

LAST NAME:	FIRST NAME:		MIDDLE NAME:
BIRTHDATE(MM/DD/YYYY)	SEX:	POSITION / DESIGNATION:	
REGION / DIVISION / SCHOOL (whichever is applicable)			
CONTACT NUMBER 1:	CONTACT NUMBER 2:		EMAIL ADDRESS:
EDUCATIONAL ATTAINMENT (DEGREE TITLE)	TITLE OF THESIS/RELATED RESEARCH PROJECT		
SIGNATURE OF PROPONENT:			

Proponent 3

LEAD PROPONENT/INDIVIDUAL PROPONENT

LAST NAME:	FIRST NAME:		MIDDLE NAME:
BIRTHDATE(MM/DD/YYYY)	SEX:	POSITION / DESIGNATION:	
REGION / DIVISION / SCHOOL (whichever is applicable)			
CONTACT NUMBER 1:	CONTACT NUMBER 2:		EMAIL ADDRESS:
EDUCATIONAL ATTAINMENT (DEGREE TITLE)	TITLE OF THESIS/RELATED RESEARCH PROJECT		
SIGNATURE OF PROPONENT:			

IMMEDIATE SUPERVISOR'S CONFORME

I hereby endorse the attached research proposal. I certify that the proponent/s has/have the capacity to implement a research study without compromising his/her office functions.

_____
Name and Signature of Immediate Supervisor
Position/Designation: _____
Date: _____

_____
Name and Signature of Immediate Supervisor
Position/Designation: _____
Date: _____

_____
Name and Signature of Immediate Supervisor
Position/Designation: _____
Date: _____

ANNEX 3: Declaration of Anti-Plagiarism and Absence of Conflict of Interest

Declaration of Anti-Plagiarism

1. I, _____, understand that plagiarism is the act of taking and using another's ideas and works and passing them off as one's own. This includes explicitly copying the whole work of another person and/or using some parts of their work without proper acknowledgment and referencing.

2. I hereby attest to the originality of this research and have cited properly all the references used. I further commit that all deliverables and the final research study emanating from this research are of original content. I have used appropriate citations in referencing other works from various sources.

3. I understand that violation of this declaration and commitment shall be subject to consequences and shall be dealt with accordingly by the Department of Education and Basic Education Research Fund.

Proponent:
Signature:
Date:

Proponent:
Signature:
Date:

Proponent:
Signature:
Date:

Declaration of Absence of Conflict of Interest

1. I, _____, understand that conflict of interest refers to situations in which financial or other personal considerations may compromise our judgment in evaluating, conducting, or reporting research.

2. I hereby declare that we do not have any personal conflict of interest that may arise from our application and submission of our research output. I understand that our research may be returned to us if found out that there is conflict of interest during the initial screening as per Section 3.2 entitled Plagiarism, Fraud, and Conflict of Interest of Article III on Special Provisions of DepEd Order No. 16, s. 2017 re: Research Management Guidelines.

3. Further, in case of any form of conflict of interest (possible or actual) which may inadvertently emerge during the conduct of our research, I will duly report it to the research committee for immediate action.

4. I understand that I may be held accountable by the Department of Education and Basic Education Research Fund for any conflict of interest which I have intentionally concealed.

Proponent:
Signature:
Date:

Proponent:
Signature:
Date:

Proponent:
Signature:
Date: