

## **ASPO SURVEY APPLICATION**

(send to ASPO Research Committee Chair)

1. Title of Survey
2. Sponsor
3. Funding and Funding Agency, if applicable
4. What is/are the objective(s) of this survey?
5. What do the author(s) expect data to be collected from this survey to show?
6. How will the data collected as a result of this study be used specifically? (i.e., grants, manuscripts, presentations, etc.)
7. How will this survey contribute to the pediatric otolaryngology field and/or literature?
8. Please provide a brief summary of the proposed statistical analyses to interpret the data collected and a letter of support from the statistical consultant performing these analyses.
9. If applicable, please provide a letter of support from the ASPO member sponsoring this survey.
10. Upon approval of the survey by the Research Committee, a letter of approval/exemption from the IRB must be sent to the ASPO Research Committee Chair before the survey can be posted/distributed.