**Request to use the Olweus Bullying Questionnaire (OBQ)**

**for Research Purposes**

Name:

Affiliation:

Address:

City:

State:

Zip:

Country:

Email:

Phone:

Please answer the questions below regarding your research questions and methodology.

1. What are your research questions? (i.e., What questions are you hoping to answer from your research?)

2. Who are the anticipated participants in your research? Please describe the numbers of participants, their age ranges, nationality, etc.)

3. Will the participants be surveyed at school or in another location? If another location, please indicate where.

4. Will you need to translate the OBQ to another language in order to conduct your study?

\_\_\_\_\_ No translation is required. We will use English or Spanish.

\_\_\_\_\_ Yes, translation is required.

 If yes, what language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 If yes, how will the translation be carried out?

**I understand that the Olweus Bullying Questionnaire is a copyrighted document and agree to use it for research purposes only. I further agree to share my findings with Dan Olweus and Sue Limber once my study is complete. If I translate the Olweus Bullying Questionnaire into another language as part of my research, I agree to send a copy of the translated questionnaire to Dr. Limber.**

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