



**Colegio de San Juan de Letran**  
**B A T A A N**

**RESEARCH OFFICE**

**LRO-SR109: INSTRUMENT VALIDATION FORM**

**Thesis/Research Title:** \_\_\_\_\_  
\_\_\_\_\_

**Proponent(s)/Author(s):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Research Adviser:** \_\_\_\_\_  
Name Signature

**Academic Department:** \_\_\_\_\_ **Program:** \_\_\_\_\_

**Research Objective/s:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Research Variables:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Research Design and Methodology:** \_\_\_\_\_

**Enumerate Survey Instrument/s:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Enumerate Interview Protocol/s:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Endorsement:** \_\_\_\_\_  
(to Validator) Name of Certified Validator Signature of Research Coordinator

**Endorsement:** \_\_\_\_\_  
(to LRO) Signature of Certified Validator Date

**Note: Please attach the survey instrument/s and/or Interview Protocol/s as well as the research paper**  
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