Approval Form (1B)

A completed form is required for each student, including all team members.

1. To Be Completed by Studer a. Student Acknowledgment:	nt and Parent				
 I understand the risks and po I have read the ISEF Rules an this research. I have read and will abide by 	d Guidelines and	l wil	l adhere to all Inte		
Student researchers are expected to ma misconduct are not condoned at any lev plagiarism, forgery, use or presentation projects will fail to qualify for competition	nintain the highes rel of research or of other researcl	st st con her's	andards of honesty npetition. Such pra s work as one's owr	ctices inc	lude but are not limited to
Student's Printed Name	Name Signature			Date Acknowledged (mm/dd/yy)	
b. Parent/Guardian Approval: I hav Research Plan/Project Summar				ossible d	_
Parent/Guardian's Printed Name	Signature				cknowledged (mm/dd/yy) t be prior to experimentation.)
2. To be completed by the loca (Required for projects requiring pr				as appro	priate.)
a. Required for projects that need prior SRC/IRB approval BEFORE experimentation (humans, vertebrates or potentially hazardous biological agents).		OR	Research Instit	search conducted at all Regulated utions with no prior fair SRC/IRB	
The SRC/IRB has carefully studied this project's Research Plan/Project Summary and all the required forms are included. My signature indicates approval of the Research Plan/Project Summary before the student begins experimentation.			This project was conducted at a regulated research institution (not home or high school, etc.), was reviewed and approved by the proper institutional board before experimentation and complies with the ISEF Rules. Attach (1C) and any required institutional approvals (e.g. IACUC, IRB).		
SRC/IRB Chair's Printed Name					
Signature Date of Appro	oval (mm/dd/yy)		SRC Chair's Printed Name		
	experimentation.)		Signature		Date of Signature (mm/dd/yy) (May be after experimentation)
3. Final ISEF Affiliated Fair SRC	Approval (Re	qui	red for ALL Pro	ojects)	
SRC Approval After Experimentation and Be I certify that this project adheres to the appro					th all ISEF Rules.
Regional SRC Chair's Printed Name	Signature			Date	e of Approval (mm/dd/yy)

Signature

(where applicable)

State/National SRC Chair's Printed Name

Date of Approval (mm/dd/yy)