Approval Form (1B)
A completed form is required for each student, including all team members.

1. To Be Completed by Student and Parent

plagiarism, forgery	y, use or presentati	-	her's	work as one's own,	petition. Such practices include and fabrication of data. Fraudule	
	rdian Approval: I ha	Signature ave read and unders cicipating in this rese			Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.) le dangers involved in the Resear d	
Parent/Guardian's F	Printed Name	Signature			Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)	
(humans, vertebrates or potentially hazardous biological agents) The SRC/IRB has carefully studied this project's Research Plan and all the required forms are included. My signature indicates approval of the Research Plan before the student begins experimentation. SRC/IRB Chair's Printed Name			OR	approval. 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 Intel ISEF Rules. Attach (1C) and required institutional approvals (e.g. IACUC, IRB). SRC Chair's Printed Name		
biological agent The SRC/IRB has ca Plan and all the rec signature indicates the student begins	arefully studied this quired forms are inc approval of the Res experimentation.	luded. My		institution (not hom reviewed and appro board before experi Intel ISEF Rules. Atta approvals (e.g. IACL	e or high school, etc.), was ved by the proper institutional mentation and complies with the ach (1C) and required institutional JC, IRB).	
biological agent The SRC/IRB has ca Plan and all the rec signature indicates the student begins	arefully studied this quired forms are inc approval of the Res experimentation. ed Name Date of Ap	luded. My		institution (not hom reviewed and appro board before experi Intel ISEF Rules. Atta approvals (e.g. IACL	e or high school, etc.), was ved by the proper institutional mentation and complies with the ach (1C) and required institutional JC, IRB).	

State/National SRC Chair's Printed Name Signature

(where applicable)

Date of Approval