

Student Checklist (1A-Individual)

This form is required for ALL projects

Every student must fill out this entire form before beginning project experimentation. PLEASE PRINT OR TYPE.

Read the "Research Plan Instructions" on www.scifair.com before completing your Research Plan/Project Summary.

Contact the MSSEF Scientific Review Committee (SRC) by e-mail at src@scifair.com with any questions.

Project year includes research conducted over a maximum, continuous 12-month period between January 2015 and April 2016.

Student Name _____ Grade _____

Home Address _____ Apt # _____ City _____ State _____ Zip Code _____

Telephone _____ Email Address _____

School Name _____

School Address _____ City _____ State _____ Zip Code _____

School Phone _____

Teacher Name _____ Email Address _____

Project Title _____

1. Is this a continuation from a previous year? (Check one) ☐ YES ☐ NO

If Yes:

a) Attach previous year(s) ☐ Abstract and ☐ Research Plan

b) Explain how this project is new and different from previous years on ☐ Continuation/Research Progression Form (7)

2. This year's laboratory experiment/data collection: (must be stated (mm/dd/yy) – Keep BLANK until experimentation starts and ends)

Start Date: _____ End Date: _____

3. Where will you conduct your experimentation? (Check all that apply)

☐ Research Institution ☐ School ☐ Field ☐ Home ☐ Other _____

4. List name, address, and phone number of all work site(s) other than school and home:

Name: _____

Address: _____

Phone: _____

5. Complete a **Research Plan & Post-Project Summary** following the Research Plan & Post-Project Summary Instructions provided and attach to this form.

6. An **Abstract** is required for all projects after experimentation.