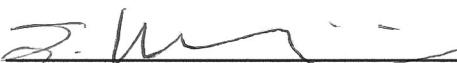


**MONTGOMERY AREA SCIENCE FAIRS REGISTRATION FORM****NAME:** Varshini Selvadurai**DATE:** 12/16/2018**HOME ADDRESS:** 23000 Birch Mead Rd , Clarksburg, MD, 20871**HOME PHONE:** 3017955864**GR:** 12**EMAIL:** varshini524@gmail.com**GENDER:** F**SCHOOL:** POH**TEACHER:** Sekhsaria**TEACHER EMAIL:** Anupama\_M\_Sekhsaria@mcpssmd.org**CATEGORY:** Computer Science**KEYWORDS SELECTED:** Artificial Intelligence, Mathematics and Statistics**TITLE OF EXHIBIT:** Analyzing Crime Statistics for Smart City Applications**TITLE NOTES:****TEAM PROJECT:** No**MY NAME-****TEAM MEMBER-****TEAM MEMBER-**

**SIGNATURES :** Read all rules before signing, particularly on safety, and animal use. Fair and ISEF Rules and Forms may be downloaded at our website [www.ScienceMontgomery.org](http://www.ScienceMontgomery.org). Projects will be disqualified when they violate the rules, particularly those on safety and animal use.

"As the Exhibitor, I certify that both the project and exhibit are principally my own work. I have read the Science Fair rules and agree to be governed by them. I accept the responsibility for submitting all materials by the deadline and will abide by the ScienceMontgomery SRC's decisions."

**Student Signature:** 

"As a PARENT or GUARDIAN, I certify to the best of my knowledge, the information supplied by the student is correct and he/she has my permission to enter ScienceMONTGOMERY . You have my permission to use my child's name, school, project title, awards won, and photos for publicity purposes. This includes photographs submitted by him/her as well as photographs and videos that may be taken in conjunction with Fair activities. This information may be used by ScienceMONTGOMERY or its sponsors for the purposes of illustration, advertising or publication in any relevant manner."

**PRINT Parent/Guardian:** NANDINI SELVADURAI

**Parent/Guardian Signature:** 

A printed copy of this form with signatures must accompany copies of official Science Fair forms including an abstract and research plan.

**Submit copies - keep the originals.**

Mail or deliver paperwork to ScienceMONTGOMERY SRC at the address provided on our website. If sending by courier do NOT require a signature. Email with attachments under 4 MB of scanned completed paperwork and documents may be sent to [src@scencemontgomery.org](mailto:src@scencemontgomery.org).

# Student Checklist (1A)

**This form is required for ALL projects.**

1. a. Student/Team Leader: Varshini Selvadurai Grade: 12

Email: Varshini524@gmail.com Phone: 301-795-5864

b. Team Member: \_\_\_\_\_ c. Team Member: \_\_\_\_\_

2. Title of Project:

Analyzing Crime Statistics for Smart City Applications

3. School: Poolesville High School School Phone: 240-740-2400

School Address: 17501 Willard Rd, Poolesville MD 20837

4. Adult Sponsor: Aaron Gild Kusne Phone/Email: 412-915-1433 aaron.kusne@nist.gov

5. Does this project need SRC/IRB/IACUC or other pre-approval?  Yes  No Tentative start date: \_\_\_\_\_

6. Is this a continuation/progression from a previous year?  Yes  No

If Yes:

a. Attach the previous year's  Abstract and  Research Plan/Project Summary

b. Explain how this project is new and different from previous years on

Continuation/Research Progression Form (7)

7. This year's laboratory experiment/data collection:

06/22/18

08/29/18

Actual Start Date: (mm/dd/yy)

End Date: (mm/dd/yy)

8. Where will you conduct your experimentation? (check all that apply)

Research Institution  School  Field  Home  Other: \_\_\_\_\_

9. List name and address of all non-home and non-school work site(s):

Name: National Institute of Standards and Technology

Address: 100 Bureau Dr, Gaithersburg

MD 20899

Phone/ email 412-915-1433

10. Complete a Research Plan/Project Summary following the Research Plan/Project Summary instructions and attach to this form.

11. An abstract is required for all projects after experimentation.