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

To Be Completed by Student Student Acknowledgment: I understand the risks and pos there read the ISEE Rules are	ssible dangers to me c		arch plan. ional Rules when conducting this
research.			
 I have read and will abide by the Student researchers are expected to main are not condoned at any level of research or presentation of other researcher's workcompetition in affiliated fairs and ISEF. 	ntain the highest stand or competition. Such prices as one's own, and fall	dards of honesty and i practices include but brication of data. Frau	ntegrity. Scientific fraud and misconduct are not limited to plagiarism, forgery, use udulent projects will fail to qualify for
Jonathan Leung	man	on Luy	6/25/19
Student's Printed Name	Signature		Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
b. Parent/Guardian Approval: I have Research Plan/Project Summars	ve read and understan y. I consent to my child	nd the risks and possil d participating i g this	ole dangers involved in the research.
Michelle Sze-Leung	Michel	le tr-Jen	e 6/25/19
Parent/Guardian's Printed Name	Signature		Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
 (Required for projects requiring priors) a. Required for projects that need prior SI BEFORE experimentation (humans, vertical hazardous biological agents). 	RC/IRB approval tebrates or potentially	b. Required for r Institutions w	research conducted at all Regulated Research ith no prior fair SRC/IRB approval.
The SRC/IRB has carefully studied this project Project Summary and all the required forms signature indicates approval of the Research Summary before the student begins expering the Hughel Summary before the student begins expering the student begins exp	s are included. My n Plan/Project	(not home or high s proper institutional	school, etc.), was reviewed and approved by the I board before experimentation and complies . Attach (1C) and any required institutional
SRC/IRB Chair's Printed Name Nature 06/18/19		SRC Chair's Printed	l Name
Signature Date of A (Must be prior	pproval (fmm/dd/vy) to experimentation.)	Signature	Date of Signature (mm/dd/yy) (May be after experimentation)
प 3. Final ISEF Affiliated Fair SRC	Approval (Req	uired for ALL Pro	ojects)
SRC Approval After Experimentation and Be I certify that this project adheres to the appro			
Regional SRC Chair's Printed Name	Signature		Date of Approval (mm/dd/yy)

Signature

State/National SRC Chair's Printed Name

(where applicable)

Date of Approval (mm/dd/yy)