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

1. To Be Completed by Stude	nt and Parent		
a. Student Acknowledgment:	it dire i di circ		
 I understand the risks and per 	ossible dangers to	me of the proposed i	esearch plan.
			International Rules when conducting
this research.			
 I have read and will abide by 	the following Ethi	ics statement	
Student researchers are expected to ma misconduct are not condoned at any lev plagiarism, forgery, use or presentation projects will fail to qualify for competitions of the projects.	el of research or co of other researche	competition. Such pracer's work as one's own	tices include but are not limited to , and fabrication of data. Fraudulent
SShamtej Singh Rana	Shent	tyle	06/25/19
Student's Printed Name	Signature	/	Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
 b. Parent/Guardian Approval: I ha Research Plan/Project Summar 			ossible dangers involved in the
Tejmeet Kour	_ 1egm	utkno	06/25/19
Parent/Guardian's Printed Name	Signature		Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
hazardous biological agents). 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 Intel ISEF Rules. Attach (1C) and any required institutional approvals (e.g. IACUC, IRB).	
January Bellete the Student Begins experime	Tradon.	Institutional appr	ovais (e.g. mese, mb).
SRC/IRB Chair's Printed Name		SRC Chair's Printe	d Name
	roval (mm/dd/yy) experimentation.)	Signature	Date of Approval (mm/dd/yy)
3. Final Intel ISEF Affiliated Fair	SRC Approval	Required for	ALL Projects)
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)
State/National SRC Chair's Printed Name	Signature		Date of Approval (mm/dd/yy)

(where applicable)