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

1.	To Be	Comp	leted l	y Student	and	Parent
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- a. Student Acknowledgment:
 - I understand the risks and possible dangers to me of the proposed research plan.

 I have read the ISEF Rules and research. I have read and will abide by the 				l Rules when conducting this	
Student researchers are expected to main are not condoned at any level of research o or presentation of other researcher's work competition in affiliated fairs and ISEF.	or competition. Such cas one's own, and f	n prac abrica	tices include but are i ation of data. Fraudul	not limited to plagiarism, forgery, use	
Mudison Elias	Madi	m	Elin	09/06/19	
Student's Printed Name b. Parent/Guardian Approval: have Research Plan/Project Summary.	I consent to my chi	ild par	ticipating in this rese	Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.) dangers involved in the earch.	
Kerri Elias	- De	W		09/06/19	
Parent/Guardian's Printed Name	Signature			Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)	
Required for projects that need prior SRC/BEFORE experimentation (humans, verteb hazardous biological agents). The SRC/IRB has carefully studied this project's Project Summary and all the required forms are signature indicates approval of the Research Pl before the student begins experimentation. SRC/IRB Chair's Printed Name	orates or potentially s Re: earch Plan/ e included. My	OR	 b. Required for research conducted at all Regulated Research Institutions with no prior fair SRC/IRB 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 ISEF Rules. Attach (1C) and any required institutional approvals (e.g. IACUC, IRB). 		
Shormb chair 31 mileu Haine			SRC Chair's Printed Nar	ne	
	oroval (mm/dd/yy) o experimentation.)		Signature	Date of Signature (mm/dd/yy) (May be after experimentation)	
3. Final ISEF Affiliated Fair SRC A SRC Approval After Experimentation and Before Control of the Experimentation	ore Competition at Re	egiona			
Regional SRC Chair's Printed Name	Signature			Date of Approval (mm/dd/yy)	
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SRC Approval After Experimentation and Before Competition at Regional/State/National Fair I certify that this project adheres to the approved Research Plan/Project Summary and complies with all ISEF Rules.						
Regional SRC Chair's Printed Name	Signature	Date of Approval (mm/dd/yγ)				
State/National SRC Chair's Printed Name (where applicable)	Signature	Date of Approval (mm/dd/yy)				