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

1.	To Be	Completed	by	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 Intel ISEF Rules and Guidelines and will adhere to all International Rules when conducting

this resea I have rea		y the following Ethic	cs sta	atement		
misconduct are not o	ondoned at any louse or presentation ualify for compet	evel of research or co n of other researche	ompo r's w	etition. Such pract ork as one's own,	and integrity. Scientific fraud and tices include but are not limited to and fabrication of data. Fraudulent	
	dian Approval: h	Signature have read and under ary. I consent to my			Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.) essible dangers involved in the this research.	
Deborah Albert		Jesty (24	3/07/19		
Parent/Guardian's Pr	inted Name	Signature			Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)	
2. To be comple (Required for projec	ojects requiring p	orior SRC/IRB APPR		L. Sign 2a or 2b a	as appropriate.) research conducted at all Regulated Research	
BEFORE experimentation (humans, vertebrates or potentially 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.				Institutions with no prior fair SRC/IRB approval. OR 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).		
SRC/IRB Chair's Printed	Name			SRC Chair's Printec	d Name	
Signature		oproval (mm/dd/yy) to experimentation.)		Signature	Date of Approval (mm/dd/yy)	
3. Final Intel ISE SRC Approval After Ex I certify that this project Regional SRC Chair's Property of the second statement o	perimentation and the app	Before Competition at	Regio			
State/National SRC Cha	air's Printed Name	Signature			Date of Approval (mm/dd/yy)	

Signature

(where applicable)

State/National SRC Chair's Printed Name