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

To Be Completed by Student and Parent a. Student Acknowledgment:

 I understand the risks and poss I have read the ISEF Rules and research. I have read and will abide by the 	Guidelines and will	l adhere to all I		s when conducting this
Student researchers are expected to maintaine not condoned at any level of research of or presentation of other researcher's work competition in affiliated fairs and ISEF. Almet Burak Buyukbayraktar Student's Printed Name b. Parent/Guardian Approval: I have Research Plan/Project Summary. I Safiye Buyukbayraktar Parent/Guardian's Printed Name	r competition. Such as one's own, and f Signature	n practices inclination of d	ude but are not limitata. Fraudulent pro Date (Mand possible dangers g in this research.	ited to plagiarism, forgery, use bjects will fail to qualify for 6 20 9 e Acknowledged (mm/dd/yy) fust be prior to experimentation.)
2. To be completed by the local or (Required for projects requiring prior			2b as appropriate	·.)
 a. Required for projects that need prior SRC/IRB approval 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. 		b. Required for research conducted at all Regulated Research 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 ISEF Rules. Attach (1C) and any required institutional approvals (e.g. IACUC, IRB).		
SRC/IRB Chair's Printed Name Signature Date of Approval (mm/dd/yy)		\sim \sim	s Printed Name	el 9/7/19
	experimentation.)	Signature		Date of Signature (mm/dd/yy) (May be after experimentation)
SRC Approval After Experimentation and Befo	re Competition at Re	egional/State/Na	nd complies with all IS	
Regional SRC Chair's Printed Name	Signature		Da	te of Approval (mm/dd/yy)

Signature

State/National SRC Chair's Printed Name

(where applicable)

Date of Approval (mm/dd/yy)