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

To Be Completed	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 Guidelines and will adhere to all International Rules when conducting this

research.  • I have read and will abide by the	following Ethics s	tate	ment			
Student researchers are expected to maintai are not condoned at any level of research or o or presentation of other researcher's work as competition in affiliated fairs and ISEF. Ethan Sontarp	competition. Such	pra abrio	ctices include but are recation of data. Fraudul	not limite	ed to plagiarism, forgery, use ects will fail to qualify for	
b. Parent/Guardian Approval: I have re Research Plan/Project Summary. I d	Signature ead and understa	nd t	he risks and possible o	Mu) langers i	Acknowledged (mm/dd/yy) ast be prior to experimentation.) involved in the	
Bari Sontarp	153	०प	tay	6/27/	19	
Parent/Guardian's Printed Name	Signature		0		Acknowledged (mm/dd/yy) ust be prior to experimentation.)	
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.		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).			
SRC/IRB Chair's Printed Name			SRC Chair's Printed Na	me		
Signature Date of Appro (Must be prior to e	oval (mm/dd/yy) experimentation.)		Signature		Date of Signature (mm/dd/yy) (May be after experimentation)	
3. Final ISEF Affiliated Fair SRC Approval (Required for ALL Projects)  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	e of Approval (mm/dd/yy)	

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/yy)			
State/National SRC Chair's Printed Name (where applicable)	Signature	Date of Approval (mm/dd/yy)			