

**To be Completed by the Student and Parent**

**a. Student Acknowledgement:**

I hereby certify that this entry represents my own original work. I have worked on my own or as part of a student team. Any assistance has been of an advisory nature. I have adhered to all local, state, and national requirements where applicable for pre-college research experimentation, including safety.

<b>(Student Name)</b>	<b>(Student Signature)</b>	<b>(Date)</b>

**b. Parent/Guardian Approval:**

I have read and understand the risks and possible dangers involved in my child's research plan. I consented to have my child participate in this research and present it at the LISC fair.

**c. Media Approval:**

Parents/guardians who object to the disclosure of their child's name and photograph to be used in connection with media relations by LISC, Inc. must notify the LISC, Inc. committee by submitting the "Media Release Non-Consent Form" on our website no later than 10 days prior to the day the student attends the science congress.

<b>(Parent/Guardian Name)</b>	<b>(Parent/Guardian Signature)</b>	<b>(Date)</b>

**To be Completed by the Student's School Advisor/Sponsor**

I am familiar with the student's research plan and to the best of my knowledge the student adhered to all local, state, and national requirements where applicable for pre-college research experimentation, including safety, and I approved this project.

Name of Advisor/Sponsor's School:		
Advisor/Sponsor's Position:		
Advisor/Sponsor's Phone #:		
<b>(Advisor/Sponsor Name)</b>	<b>(Advisor/Sponsor Signature)</b>	<b>(Date)</b>

**To be Completed by the Student's Research Mentor\***

**\*Fill out below ONLY if student's research was performed at a Regulated Research Institution.**

*Note – Intel ISEF form 1C may be submitted in place of filling out the information below.*

I am familiar with the student's research plan and to the best of my knowledge had adhered to all local, state, and national requirements where applicable for pre-college research experimentation, including safety, and I approved this project.

This research was primarily performed at:		
	<b>(Name of University/College/Research Institute and Location)</b>	
Mentor's Position:	Phone #:	
<b>(Mentor Name)</b>	<b>(Mentor Signature)</b>	<b>(Date)</b>

**To be Completed by the School Building Principal**

I give permission for the above named student to participate in the Long Island Science Congress fair.

<b>(Principal Name)</b>	<b>(Principal Signature)</b>	<b>(Date)</b>