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

***************************************				-
1. To Be Completed by Student ar	nd Parent	***************************************		
a. Student Acknowledgment:				
<ul> <li>I understand the risks and possible dangers to me of the proposed research plan.</li> </ul>				
<ul> <li>I have read the ISEF Rules and Guidelines and will adhere to all International Rules when conducting this</li> </ul>				
research.				
<ul> <li>I have read and will abide by the f</li> </ul>	following Ethics s	state	ment	
Student researchers are expected to maintain	n the highest star	ndard	s of honesty and inte	grity. Scientific fraud and misconduct
are not condoned at any level of research or o				
or presentation of other researcher's work as competition in affiliated fairs and ISEF.	one's own, and i	abric	ation of data. Fraudu	ient projects will fall to qualify for
Arjun Panickssery	11 1	/_ 、	· Lun	08/01/2019
- Arjuit Fallickssery	Myser 1	am	ensey	
Student's Printed Name	/ Signature		1	Date Acknowledged (mm/dd/yy)
	0			(Must be prior to experimentation.)
b. Parent/Guardian Approval: I have re				dangers involved in the
Research Plan/Project Summary. I c	onsent to my chi	ld pa	rticipating in this res	earch.
Nisha Korattswaroopam	6/hl	/		08/01/2019
Parent/Guardian's Printed Name	Signature	•	•	Date Acknowledged (mm/dd/yy)
				(Must 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.			Institutions with range of the project was condu (not home or high schooproper institutional box	search conducted at all Regulated Research thin opinion fair SRC/IRB approval.  ducted at a regulated research institution thool, etc.), was reviewed and approved by the board before experimentation and complies Attach (1C) and any required institutional
			approvals (e.g. IACUC, IRB).	
SRC/IRB Chair's Printed Name				
SNC/NO Chair 31 Thice Traine			SRC Chair's Printed Na	me
Signature Date of Appro (Must be prior to e	val (mm/dd/yy)		Signature	Date of Signature (mm/dd/yy) (May be after experimentation)
(ividst be pilot to e	Aperimentation.;			(May be after experimentation)
3. Final ISEF Affiliated Fair SRC Ap	proval (Rec	auir	ed for ALL Proje	cts)
or marioti / mateur an one Ap	provar (ite	quii	cu for ALL i foje	Cts
SRC Approval After Experimentation and Before	Competition at Re	egiona	al/State/National Fair	
I certify that this project adheres to the approved				vith all ISEF Rules.
Decisional CDC Chair/a Drinks IN.	<u></u>			
Regional SRC Chair's Printed Name	Signature			Date of Approval (mm/dd/yy)
	***************************************			
State/National SRC Chair's Printed Name	Signature			Date of Approval (mm/dd/yy)

(where applicable)