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

## 1. To Be Completed by Student and Parent

- 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.

Ethan Horowitz	Ethuntlo avit 7		9/29/19
Student's Printed Name  b. Parent/Guardian Approval: I hav Research Plan/Project Summary			
Matthew Horowitz	- OKUTEN	<u></u>	9/29/19
Parent/Guardian's Printed Name	Signature		Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
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.		(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).	
Thronge Filips		SDC Chair's Printed Name	
Thomas Elkins SRC/IRB Chair's Printed Marine		I SDC Chair's Printed N	lama
	1/19	SRC Chair's Printed N	Name
SRC/IRB Chair's Printed Name  10 01 Signature Date of Ap	pproval (mm/dd/yy) to experimentation.)	SRC Chair's Printed N	Date of Signature (mm/dd/yy) (May be after experimentation)
SRC/IRB Chair's Printed Name  10 01 Signature Date of Ap	to experimentation.)		Date of Signature (mm/dd/yy) (May be after experimentation)

Signature

State/National SRC Chair's Printed Name

(where applicable)

Date of Approval (mm/dd/yy)

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A completed form is required for each student, including all team members.

1. To Be Completed by Student and Pa
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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 statement

Student researchers are expected to maintain the highest standards of honesty and integrity. Scientific fraud and misconduct are not condoned at any level of research or competition. Such practices include but are not limited to plagiarism, forgery, use

Joshua De Leeuw	Derner Ne Secunt	09/29/19
Student's Printed Name	Signature	Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
	ave read and understand the risks and poss ry. I consent to my child participating in thi	
Parent/Guardian's Printed Name	Signature	Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)

2. To be completed by the local or affiliated Fair SRC (Required for projects requiring prior SRC/IRB APPROVAL. Sign 2a or 2b as appropriate.)

a. Required for projects that need prior SRC/IRB approval BEFORE experimentation (humans, vertebrates or potentially hazardous biological agents).	0
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 Summar before the student begins experimentation.	ry
Thom of Elkios  SRC/IRB Chair's Printed Name  10 01 19  Date of Approval (mm/dd/yy)  (Must be prior to experimentation.)	_

<ul> <li>Required for research conducted at all Regulated Resea Institutions with no prior fair SRC/IRB approval.</li> </ul>				
R	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 Chair's Printed Name	was the second		
	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 of Approval (mm/dd/yy)	
State/National SRC Chair's Printed Name (where applicable)	Signature	Date of Approval (mm/dd/yy)	