

Student Checklist (1A)

This form is required for ALL projects.

1. a. Student/Team Leader: Ethan Horowitz Grade: 11
 Email: ethan-horowitz@mufsd.org Phone: (516) 680-8206
 b. Team Member: Joshua De Leeuw c. Team Member: _____
2. Title of Project:
A Comparison of Photocatalysis and Electrocoagulation for Azo Dye Treatment and the Use of H₂ PEM Fuel Cells to Increase Coagulation Efficiency
3. School: Manhasset High School School Phone: 516-267-7700
 School Address: 200 Memorial Place
Manhasset, NY 11030
4. Adult Sponsor: Alison Hvinger Phone/Email: Alison-Hvinger@ManhassetSchools.org
(516) 267-7700
5. Does this project need SRC/IRB/IACUC or other pre-approval? ☐ Yes ☒ No Tentative start date: 10/2/19
6. Is this a continuation/progression from a previous year? ☒ Yes ☐ No
 If Yes:
 a. Attach the previous year's ☒ Abstract and ☒ Research Plan/Project Summary
 b. Explain how this project is new and different from previous years on
☒ Continuation/Research Progression Form (7)
7. This year's laboratory experiment/data collection:
10/02/19 02/04/20
 Actual Start Date: (mm/dd/yy) End Date: (mm/dd/yy)
8. Where will you conduct your experimentation? (check all that apply)
☐ Research Institution ☒ School ☐ Field ☐ Home ☐ Other: _____
9. List name and address of all non-home and non-school work site(s):
 Name: _____
 Address: _____
 Phone/ email: _____
10. Complete a Research Plan/Project Summary following the Research Plan/Project Summary instructions and attach to this form.
11. An abstract is required for all projects after experimentation.