

Student Checklist (1A)

This form is required for ALL projects.

1. a. Student/Team Leader: Enyo Okeoma Grade: 12
Email: enyoteremchi@gmail.com Phone: (515) 803-1380
b. Team Member: _____ c. Team Member: _____
2. Title of Project:
Semen extracellular vesicles (SEVs) contain proteins that inhibit HIV-1 reverse transcriptase RNA-dependent DNA polymerization in vitro
3. School: Ward Melville Senior High School School Phone: (631) 730-4900
School Address: 380 Old Town Rd, Setauket- East Setauket, NY 11733
4. Adult Sponsor: Dr. Marnie Kula Phone/Email: mkula@3villagecsd.org/(631) 730-4929
5. Does this project need SRC/IRB/IACUC or other pre-approval? ☒ Yes ☐ No Tentative start date: _____
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:
01/07/19 11/06/19
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: Stony Brook University
Address: 100 Nicolls Rd, Stony Brook, NY 11794
Phone/ email: (631) 444-3055
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.