

# Student Checklist (1A)

This form is required for ALL projects.

1. a. Student/Team Leader: Kyle Cheung Grade: 12  
Email: kylecheung@yahoo.com Phone: 516-637-3246  
b. Team Member: \_\_\_\_\_ c. Team Member: \_\_\_\_\_
2. Title of Project:  
Multifaceted approach to eradicate the lethal plant pathogen, Botrytis cinerea, by examining the role of proteins ADF4, ILR3, XandH, and FLS2
3. School: Plainview-Old Bethpage JFK High School School Phone: 516-434-3000  
School Address: 106 Washington Avenue Plainview, NY, 11803
4. Adult Sponsor: Rohr Sheikh Phone/Email: 516 434 6486 rsheikh@pedscheds.org
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:  
6/21/19 8/8/19  
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: Michigan State University  
Address: 620 Farm Lane Room  
319  
Phone/ email: (517) 432-4854 proto53@msu.edu
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.