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

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1. To Be Completed by Student a a. Student Acknowledgment: • I understand the risks and possil • I have read the ISEF Rules and G research.	ole dangers to mo uidelines and wi	ll adl	here to all Internation	ch plan. onal Rules when conducting this
 I have read and will abide by the Student researchers are expected to maintain are not condoned at any level of research or 	n the highest sta	ndar	ds of honesty and in	Le Uot littiited to biggigi igiti' ioi gei 1, age
or presentation of other researcher's work a	s one's own, and	fabri	ication of data. Frau	dulent projects will rail to quality for
competition in affiliated fairs and ISEF. Suchir Misra	Sel.	V	lu-	06/18/19
Student's Printed Name	Signature		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
b. Parent/Guardian Approval: I have re Research Plan/Project Summary. I c	ead and underst	and t	ne risks and possible articinating in this re	e dangers involved in the
Maya Konaka	02/12	/	al troipating in time	06/18/19
Parent/Guardian's Printed Name	Signature			Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
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.		OR	Institutions with no prior fair SRC/IRB approval. 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/IRB Chair's Printed Name			SRC Chair's Printed Name	
Date of Approx (Must be prior to ex	ral (mm/dd/yy) sperimentation.)		Signature	Date of Signature (mm/dd/yy) (May be after experimentation)
S. Final ISEF Affiliated Fair SRC App	oroval (Rec	quir	ed for ALL Proj	ects)
SRC Approval After Experimentation and Before I certify that this project adheres to the approved I	Competition at Re Research Plan/Pro	glona ject S	al/State/National Fair Summary and complies	with all ISEF Rules.
Regional SRC Chair's Printed Name	Signature			Date of Approval (mm/dd/yy)
State/National SPC Chair's Printed Name	Signature			Date of Approval (mm/dd/yy)

(where applicable)